

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cherokee

Personally Comes Mrs.

Malinda C. Dyer

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

Cherokee

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

continuously ever since the year 1855 That she is the Widow ofReuf. F. Dyer

who was a Soldier in Company

71of the 1stRegiment of Lee's CavalryVolunteers, that he enlisted in said regiment on or about the month of May1862 and served in the Army up to May 1864 That he lost hislife on the 14 day of May 1864 (State here

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

was killed near Dalton Georgia in May 1864

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1853, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of Cherokee County for the year ending February 15th, 1895, and now apply for the pension provided by law for the year ending February 15th, 1896.

Sworn to and subscribed before me, this

10th day of Jan'y 1890.A. C. Gorm Ordinary.

Post-office

Malinda C. Dyer

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cherokee

Personally Comes Mrs.

Malinda C. Dyer

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

Cherokee

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

continuously ever since 1855 That she is the Widow ofReuf. F. Dyer

who was a Soldier in Company

71of the 1stRegiment of Lee's CavalryVolunteers, that enlisted in said regiment on or about the month of May1862 and served in the Army up to May 1864 That he lost hislife on the 14 day of May 1864 (State here

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

was killed in line of duty near Dalton Ga the 14th day of May 1864

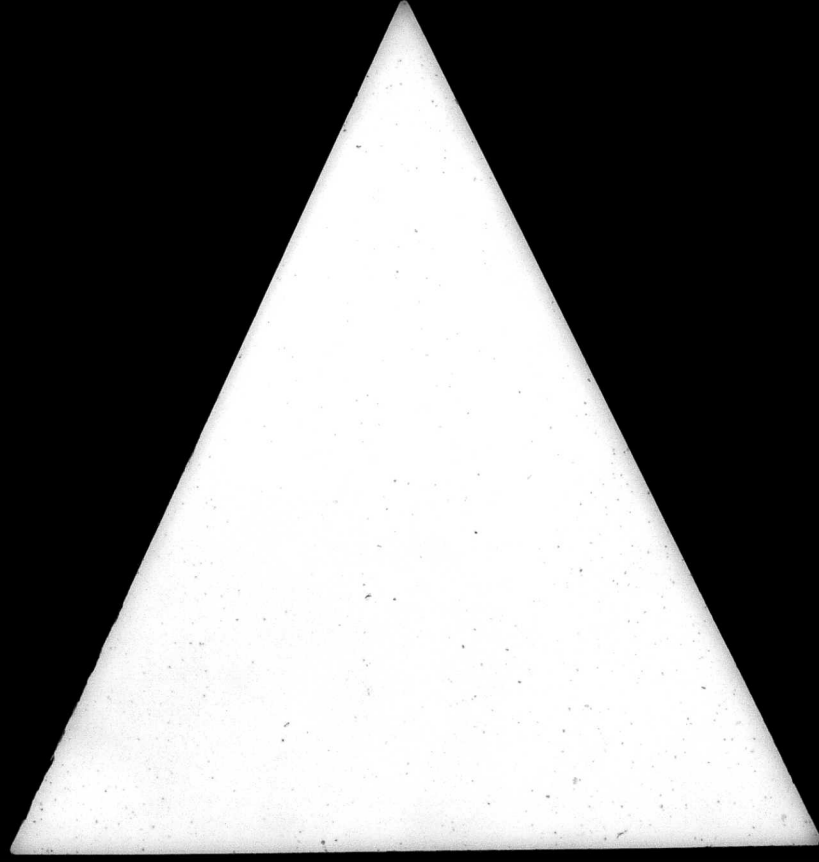
Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1853, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of Cherokee County for the year ending February 15th, 1896, and now apply for the pension provided by law for the year ending February 15th, 1897.

Sworn to and subscribed before me, this

21 day of Jan'y 1897.A. C. Gorm Ordinary.

Post-office

Malinda C. Dyer



KODAK SAFETY FILM

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County, }

I, Eleanor Edge, hereby authorize

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

me at Centerville

In Witness Whereof, I have hereunto set my hand and seal, this 5 day of February 1902.

Executed in presence of

J. S. O'Neil

Eleanor Edge [L. S.]
on

Edge, Eleanor
Cherokee, County
To Those Heretofore Paid

1902.

No. 764

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mrs. Eleanor Edge

OF

Cherokee County,

Widow of J. S. Edge

Co. 71 15. S. C. Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

2/4 1902
AND HANDLED TO

only

GEO. W. HARRISON, STATE PRINTER, ATLANTA, GA.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, Ellender Edge, hereby authorize

A. B. Brown of Cartersville

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

me at Cartersville

In Witness Whereof, I have hereunto set my hand and seal, this 8

day of January 1902. Ellender Edge [L. S.]
on

Executed in presence of

J. D. Prie

Edge, Ellender
Cherokee County
To Those Hereinbefore Paid

1902.

No. 764

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mrs. Ellender Edge

OF

Cherokee County,

Widow of Frank Edge

Co. H 1st S. C. Regiment

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

2/4 1902

AND HANDED TO

Only

Geo. W. HARRISON STATE PRINTER, ATLANTA, GA.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

PERSONALLY COMES MRS.

County of CherokeeEleanor Edge

Cherokee 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 ever since 1872.

71 of the John C. Edge who was a soldier in Company
15 Regiment of I.C.

Volunteers, that he enlisted in said regiment on or about the month of
180 7 and served in the Army up to Sept 11 180 2. That he died
on the 2 day of May 18 80.

He never went back to the Army because he was never able. His leg wasted away and had to use a wooden leg

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 65, Feb 15

I have been allowed an Indigent pension as a resident of Cherokee
County, under Act 1900, for the year 1902, and now apply for the pension provided by law for the
year ending December 31, 1902.

Sworn to and subscribed before me,
this 8 day of Jan 1902. A.C. Cain Ordinary. Post-Office Sharp 20
this claim was approved me 1901

State of Georgia, A.C. Cain
Cherokee County, Ordinary of said County, certify that I am well
acquainted with Mrs. Eleanor Edge, who made the above affidavit and
am satisfied that the facts therein stated are true, and I know she is the individual she represents
herself to be, and that she has continuously resided in this State since the
day of 1872.

Given under my official signature and seal, this the 8 day of Jan 1902.

{ Official }
{ Seal }

Ordinary of Cherokee County.

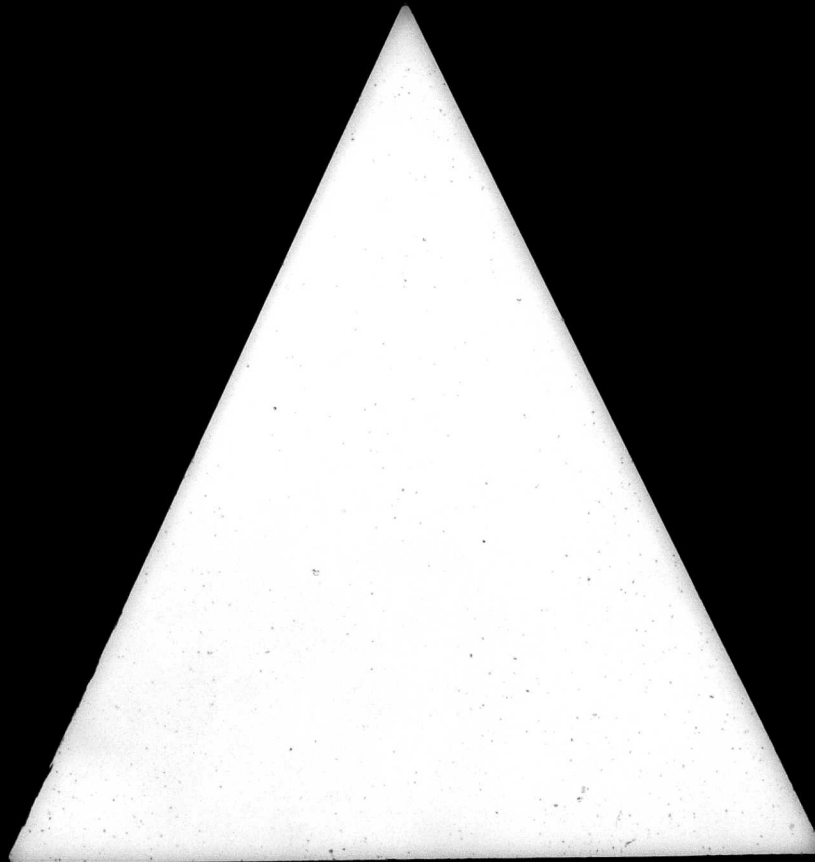
NOTE.—All blanks must be filled.

Vouchers and affidavits must bear date after January 1st, 1902.

Ordinary or County.

NOTE.—All blanks must be filled.

Vouchers and affidavits must bear date after January 1st, 1902.



EDGEHART
Cherokee County
OK

No. _____

**WIDOW'S
Indigent Pension.
1901.**

Name *Sarah E. Edge*

County *Cherokee*

Widow of *John Edge*

Ct. 158 C 204

Approved *[Signature]* 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

1901.

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

5/20/1901

POWER OF ATTORNEY.

STATE OF GEORGIA.

Cherokee County.

I, *Sarah E. Edge*,

hereby authorize

of *Cherokee* County, to receive and receipt for the pension allowed me that he

remit the same to *Sarah E. Edge* by his check or registered mail.

Witness my hand this *15* day of *May* 1901.

Executed in presence of

Sarah E. Edge Ordinary,

Cherokee County.

Sarah E. Edge

L. B.

POWER OF ATTORNEY.

STATE OF GEORGIA.

Cherokee County.

I, Sarah E. Edge hereby authorize W. B. Wright of Atlanta Ga County, to receive and receipt for the pension allowed and that he remit the same to W. B. Wright by his check or registered mail.

Witness my hand this 15th day of May 1901

Executed in presence of

W. B. Wright Ordinary, Cherokee County.

Sarah E. Edge L. S.

SEAL

Questions for Applicant.

STATE OF GEORGIA,

Cherokee County.

Mrs Sarah E. Edge of said State and County, desiring to avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly, passed 1900, hereby submits her proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (Give State, County and Post Office.)
Sarah E. Edge Cherokee Ga Cherokee County
2. How long and since when have you been a resident of this State? Since 1884
3. When and where were you born? December 1842 Chattahoochee, Ga.
4. When and where was your husband born—state his full name, and when were you and he married?
Mar 1841 State, S. C. Married Feb 15, 1865
John Edge
5. When and where, and in what Company and Regiment did your husband enlist or serve during the war between the States? 1861 Union C. S. S. C. in company 15th S. C. Volunteers
6. How long did your husband serve in said Company and Regiment? three years
7. When and where did your husband's Company and Regiment surrender and was discharged?
near Appomattox C. S. S. 1865
8. Was your husband present at the time and place when his Company and Regiment surrendered?
he was not
9. If not with his command at surrender, state clearly and specifically where he was, when he left command, for what cause, and by what authority? Said Husband was wounded at Sharpsburg Sept. 15th 1862 in the leg. He was able for service any more, was ordered to go to the hospital.
10. When and where did your husband die? 1880 Cherokee County, Ga.
11. Which of the following grounds do you base your application for Pension, viz: First—Age and Poverty; Second—Infirmary and Poverty; or Third—Blindness and Poverty? all 3 of the above
12. If upon the first ground, state how long you have been in such a condition that you cannot earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind, and when and where you lost your sight? have been for several years not able to earn my support
13. What has been your occupation since your husband's death? House keeping and done all I could on farm to help my children make ends meet
14. How much can you earn gross, by your own exertion or labor? very small amount
15. What property, real or personal, or income do you have or possess, and of gross value?
small amount of household furniture
16. What property, real or personal, did you possess at death of husband or he left you, and of the year 1899-1900, and what disposition, if any, by sale or gift, have you made of the same? Husband left very small amount of personal property
17. In what counties did you reside in 1899 and 1900, and what property did you return for taxation?
Cherokee County made no return
18. How have you been supported since death of husband, and especially for 1899 and 1900?
done all I could. Sent two years daughter to school.
19. How much did your support cost for each of those years, and how much did you contribute by your own labor or income? could not say I lived as one of the family
20. What was your employment during 1899 and 1900—how much did you receive for each year?
I done what I could on the farm
21. Have you a family? If so, who composes such family? Give their means of support? Have they any lands or other property? Have five children all Union, all poor
22. Have you ever made an application for pension before? no
23. How many applications have you made for a Pension, and under what class? one as my husband's widow and as S. C. S. S. C. rejected

Sworn to and subscribed before me this 20th day of April 1901 } Sarah E. Edge
W. B. Wright Ordinary,
of Cherokee County.

WIDOW'S

Indigent Pension.

1901.

Name Sarah E. Edge
County Cherokee

Widow of John Edge
C. S. S. C. 15th S. C. Vol

JOHN W. LINDSEY,
Commissioner of Pensions.

VARIANT HANDLED TO

1901.
W. B. Wright, State Printer, Atlanta, Ga.

Questions for Witnesses.

STATE OF ^{South Carolina} ~~GEORGIA~~,

Union County.

F. R. Bould & J. J. Hughes of said State and County, having been presented as a witness in support of the Application of Mrs. Sarah E. Edge for a Pension under the Act of 1900, and after having been duly sworn true answers to make to the following questions, deposes and answers as follows:

- What is your name and where do you reside? F. R. Bould & J. J. Hughes
Union County, Ga.
- Are you acquainted with the applicant, Mrs. Sarah E. Edge?
- If so, how long have you known her? Before the war between the States
- Where does she reside, and how long and since when has she been a resident of this State? North Georgia - Mt. Union 1874
- When and where was she born? Union County, Ga.
- Were you ever acquainted with her husband? Yes
- Where did he reside in 1861? Union County, Ga.
- When and to whom was he married? Ellen Spear
- When and where was he born? Cheshire, Conn. Ga.
- How long have you known him? From Boyhood
- When and where did he enlist in the war between the States, and in what Company and Regiment, did he enlist and how do you know this? 1861 Co. H. 1st Reg. S.C.V. War with '61
- Were you a member of the same Company and Regiment? Same Reg - Co. H
- How long did he perform regular military duty? From enlistment until
wounded at Sharpsburg, Md. 1862
- When and where was his Company and Regiment surrendered and discharged from service? at Annapolis, Md. April 1865
- Were you with the command when it surrendered? No
- Was John Edge the husband of applicant present?
No
- If not present, where was he? at home
- When and where did he leave his Command? Sharpsburg, Md.
For what cause? wounded loss of leg
By whose authority he left? Medical Discharge
How do you know all this? (State fully and clearly.) I was in the army at the time with him
- When and where did John Edge die?
I am informed that he died in Cherokee Co. Ga.
- Where did he reside at his death and how long had he been a resident of Georgia at his death?
Northwest of Ga. Union 1874
- Do you of your own knowledge know that applicant is the lawful widow of John Edge?
Yes
- Has she remained unmarried since her soldier husband's death, and is now his widow? Yes
- What property, effects or income has the applicant, if any, and how do you know this of your own knowledge? No property, she is a poor neighbor of mine
- What property, effects or income did applicant possess in 1899 and 1900 and what disposition did she make of it? No property
- Has applicant conveyed any property in last two years or given any away, if so what was it and to whom? had none to convey
- What is applicant's physical condition and her chances and ability to earn a support? she is
deaf and not able to work for her

- Is applicant able to earn a support at labor of any sort, if not why? she is deaf and not able to work for her
- How was she supported for 1899 and 1900? by her children
- How much did applicant contribute to her support for last two years? nothing
- Give a full and complete statement of applicant's physical condition? she is deaf and not able to work for her
- What interest have you in the recovery of this pension by the applicant? none

Sworn to and subscribed before me this 6th

day of May 1901

Jason M. Hines Ordinary

Union County.

Affidavits of Physicians.

STATE OF GEORGIA,

Union County.

Personally before me comes F. R. Bould and J. J. Hughes both known to me to be reputable physicians of said county, who, being severally sworn, say on oath that they have examined carefully Mrs. Sarah E. Edge applicant for a Pension under Act of 1900, and after such personal examination say that her physical condition is this: she has a nervous affection and indications of breaking down, troubled with madness and general weakness.

and we have no interest in said pension if allowed.

Sworn to and subscribed before me this 10th

day of April 1901

A. L. Bourn Ordinary,

Cherokee County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cherokee County.

I, A. L. Bourn Ordinary in and for said county, hereby certify that the applicant, Mrs. Sarah E. Edge resides in said county, and has been a bona fide resident of this State since 1874 day of April, and that the witnesses, Mr. J. M. Hines & J. M. Bates and J. J. Hughes are of trustworthy character, and that their statements are entitled to full faith and credit.

I do further certify that before answering the foregoing questions, the applicant and said witnesses took the oath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses before the same was signed and subscribed.

I further certify that the tax digest of Cherokee county shows that applicant returned for taxation in her own name in 1899, no property dollars worth of property, and in 1900, no property dollars worth of property.

Witness my hand and official seal, this 10th day of May 1901

{ SEAL }

A. L. Bourn Ordinary,

Cherokee County.

- Notes—1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth; So help you God."
2. Additional affidavits may be attached, if blank spaces are insufficient.
3. All affidavits must be made before Ordinary.
4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since 28th April, 1865, not entitled.
5. Witnesses and two Physicians are necessary to make out claims.

I am here from 22 to 23 answered
if I please to after being duly sworn
at 6 o'clock, P.M. Cherokee

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County. }

I, Mrs. S. E. Edge, hereby authorize

Mr. S. Wright of Atlanta, Ga.

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

S. E. Edge at Cherokee, Ga.

In Witness Whereof, I have hereunto set my hand and seal, this 3d

day of May 1903.

S. E. Edge [L. S.]

Executed in the presence of

S. E. Edge

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County. }

I, S. E. Edge, hereby authorize

Mr. S. Wright of Atlanta, Ga.

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

S. E. Edge at Cherokee, Ga.

In Witness Whereof, I have hereunto set my hand and seal, this 4th

day of May 1904.

Executed in presence of

S. E. Edge

S. E. Edge [L. S.]

Edge, S. E. (ms)
Cherokee County
To Those Heretofore Paid

1903.

No. 1149

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mrs. S. E. Edge

OF

Cherokee County,

Widow of John E. Edge

Co. F. 15th S. I. C. Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

2/16 1903

AND HANDLED TO

M. A. H.

Geo. W. Harrison, State Printer, Atlanta.

Edge, Sarah E.
Cherokee County

TO THOSE HERETOFORE PAID.

1904.

No. 1376

INDIGENT
WIDOW'S PENSION

FOR YEAR ENDING DECEMBER 31, 1904.

PAID TO

Mrs. S. E. Edge

Cherokee County,

Widow of John E. Edge

Co. F. 15th S. I. C. Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

FEB 18 1904.

AND HANDLED TO

Edge

Geo. W. Harrison, State Printer, Atlanta.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

PERSONALLY COMES MRS.

County of CherokeeS. E. Edge

who, being sworn, says on oath, that she is a bona fide resident of said County of Cherokee State of Georgia, and that she has RESIDED in said State continuously ever since 1841

That she is the Widow of John C. Edge who was a soldier in Company 4 of the 15th Regiment of S. C.

Volunteers, that he enlisted in said regiment on or about the month of July 1861, and served in the Army up to 1864 That he died on the 2nd day of May 1864

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 July the year 1865.

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

Sworn to and subscribed before me, this 3rd day of May 1903. W. C. Bann, Ordinary.

Post-Office

State of Georgia,

I, W. C. Bann

Ordinary of said County, certify that I am well

acquainted with Mrs. S. E. Edge, 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 3rd day of May 1841

Given under my official signature and seal, this the 3rd day of May 1903.

Ordinary of Cherokee County.

NOTE.—All blanks must be filled.
Vouchers and affidavits must bear date after January 1st, 1903.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

PERSONALLY COMES MRS.

County of CherokeeS. E. Edge

who, being sworn, says on oath that she is a bona fide resident of said County of Cherokee State of Georgia, and that she has RESIDED in said State continuously ever since 1841

That she is the Widow of John C. Edge who was a soldier in Company 4 of the 15th Regiment of S. C.

Volunteers, that he enlisted in said regiment on or about the month of July 1861, and served in the Army up to 1864 That he died on the 2nd day of May 1864

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 1865.

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

Sworn to and subscribed before me, this 4th day of May 1904. W. C. Bann, Ordinary.

Post Office

State of Georgia,

I, W. C. Bann

Ordinary of said County, certify that I am well

acquainted with Mrs. S. E. Edge, 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 3rd day of May 1841

Given under my official signature and seal, this the 4th day of May 1904.

Ordinary of Cherokee County.

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

STATE OF GEORGIA,

I, S. E. Edgar, hereby authorize
H. J. Webb of Cherokee
to receive and receipt for the pension paid hereon, and request that he remit same to
at _____

Executed in presence of

Executed in presence of

J. D. [Signature]

1905.

No. 1580

**INDIGENT
WIDOW'S PENSION,**

For year ending Dec. 31, 1905.

PAID TO

PAID TO
Mrs. S. E. Edge

OF
Shenice County,

Widow of John C. Edge
Co. F. 15 I.C. Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions

WARRANT ISSUED

FEB 23 1905.

AND HANDED TO

Mark

THE FRANKLIN PRINTING AND PUBLISHING CO., ATLANTA.

FILED

SEP 12 1935

VETERAN SERVICE OFFICE
A. L. HENSON, Director

FILED
NOV 15 1935

NOV 15 1935

NOV 15 1935
VETERAN SERVICE OFFICE
A. L. HENNING, Director

PAID TO ORDINARY ON THIS CLAIM:					
DATE 1935	FUND FROM WHICH PAID				
11-19	CXC			30 00	
8-31-36	CXC			10 45 50	
				13 7 39	
X	104.50	TOTAL.		30 10 n	

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 2

STATE OF GEORGIA,

County of Cherokee

PERSONALLY COMES MRS.

S. E. Edge

who, being sworn says on oath, that she is a bona fide resident of said County of Cherokee State of Georgia, and that she has RESIDED in said State continuously ever since 1871. That she is the Widow of John C. Edge who was a soldier in Company 7 of the 15 Regiment of S. C. Volunteers, that he enlisted in said regiment on or about the month of Aug 1861, and served in the Army up to 1864. That he died on the 2 day of May 1880.

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 1863.

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

Sworn to and subscribed before me, this 9 day of July 1905. W. J. Webb Ordinary.

S. E. Edge
Post-Office

State of Georgia,

County of Cherokee

I, W. J. Webb

Ordinary of said County, certify that I am well

acquainted with Mrs. S. E. Edge, 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 9 day of July 1871.

Given under my official signature and seal, this the 9 day of July 1905.

Official Seal.

W. J. Webb
Ordinary of Cherokee County.

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

Application for Pension Due to a Deceased Pensioner

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

(Under Act Approved August 15, 1904)

GEORGIA, Cherokee County.

Personally before me, the Ordinary of said County, comes S. E. Edge

of said County, who, after being sworn, on oath says that he knew Mrs. S. E. Edge of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in County, in this State, on the 74 day of Aug, 1901, and that pensioner left no widow surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$24.15, per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me,

W. J. Webb Ordinary
Cherokee County
(Seal of Ordinary)

S. E. Edge

CERTIFICATE OF ORDINARY

GEORGIA, Cherokee County.

I, W. J. Webb Ordinary of said County, do certify that I personally know S. E. Edge, who is a resident citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also know Mrs. S. E. Edge while in life and that this was the same person whose name appears on the Pension Roll of Cherokee County, and was paid a Pension of 24.15 Dollars in said County for 1901, and I now believe said pensioner to be dead; and that the instructions at the foot of this voucher have been carefully observed in making up this voucher and the bills which are attached hereto.

Given under my hand and official seal, this 9 day of July, 1905.
(Seal of Ordinary) W. J. Webb Ordinary
Cherokee County

INSTRUCTIONS:

- 1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
- 2nd. Each account must be sworn to before the Ordinary, and in the following form:
"The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of S. E. Edge, who died without owning sufficient property to pay this bill.
- 3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed as indicated.
- 4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.
- 5th. Return this application, and attached bills, properly receipted, to the Pension Department.
- 6th. Ordinary should see that the back of this blank, when folded, is filled out.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY.

I, S. E. Edge, hereby authorize

W. J. Webb of Canton Ga

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

at

In Witness Whereof, I have hereunto set my hand and seal, this 5th

day of Jan 1906.

S. E. Edge [L. S.]
mark

Executed in presence of

F. M. Webb

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY.

I, S. E. Edge, hereby authorize

W. J. Webb of Canton

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

at

In Witness Whereof, I have hereunto set my hand and seal, this 2

day of Jan 1907.

S. E. Edge [L. S.]

Executed in presence of

F. M. Webb

Edge Sarah E.

Cherokee County

To Those Heretofore Paid.

1906.

No. 883

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1906.

PAID TO

Mrs. S. E. Edge

of

Cherokee County,

Widow of John C. Edge

Co. F. 16th S.C. Regiment.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

FEB 1 1906

AND HANDLED TO

ONE FRANCIS HARRISON AND RECEIVED OF, ATLANTA, Ga.

Edge Sarah
Cherokee County

To Those Heretofore Paid.

1907.

No. 1767

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1907.

PAID TO

Mrs. S. E. Edge

of

Cherokee County,

Widow of John C. Edge

Co. F. 16th S.C. Regiment.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

FEB 13 1907

AND HANDLED TO

ONE FRANCIS HARRISON, STATE TREASURER, ATLANTA.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 1

STATE OF GEORGIA,

County of Cherokee

PERSONALLY COMES MRS.

S. E. Edge

who, being sworn says on oath, that she is a bona fide resident of said County of Cherokee State of Georgia, and that she has resided in said State continuously ever since 1871 That she is the Widow of John C. Edge who was a soldier in Company D of the 15th S. C. Regiment of S. C. Volunteers, that he enlisted in said regiment on or about the month of July 1861, and served in the Army up to 1864 That he died on the 2 day of May 1864.

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 1865.

I have been allowed an Indigent pension as a resident of Cherokee County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 31, 1906.

Sworn to and subscribed before me this 6th day of Jan 1906. M. J. Webb, Ordinary.

S. E. Edge
Post Office

State of Georgia,

Cherokee County.

I, M. J. Webb

Ordinary of said County, certify that I am well acquainted with Mrs. S. E. Edge, who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 1871.

Given under my official signature and seal, this the 5th day of Jan 1906.

Official Seal

M. J. Webb
Ordinary of Cherokee County.

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

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 2

STATE OF GEORGIA,

County of Cherokee

PERSONALLY COMES MRS.

S. E. Edge

who, being sworn says on oath, that she is a bona fide resident of said County of Cherokee State of Georgia, and that she has resided in said State continuously ever since 1871 That she is the Widow of John Edge who was a soldier in Company F of the 15th S. C. Regiment of Vol. Volunteers, that he enlisted in said regiment on or about the month of July 1861, and served in the Army up to 1864 That he died on the 2nd day of May 1860.

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 1865.

I have been allowed an Indigent pension as a resident of Cherokee County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the year ending December 31, 1907.

Sworn to and subscribed before me this 2 day of Jan 1907. S. E. Edge, Ordinary.

S. E. Edge
Post Office Shoptop

State of Georgia,

Cherokee County.

I, M. J. Webb

Ordinary of said County, certify that I am well acquainted with Mrs. S. E. Edge, who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 1871.

Given under my official signature and seal, this the 2 day of Jan 1907.

Official Seal

M. J. Webb
Ordinary of Cherokee County.

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1907.



North Canton Store

BRANCH OF
JONES MERCANTILE COMPANY
Canton, Georgia



Mrs S E Edge
Canton, Ga.

DATE	ITEMS	CHARGES	CREDITS	BALANCE
1935 8-15	ACCOUNT RENDERED Embalming 25.00 Casket 85.00 Digging grave 8.00 Dress robe 15.00 1 slip 1 00 1 pr hose 50	134.50		134.50
The above and foregoing account is rendered for funeral expenses of Mrs S E Edge. Who died without owning sufficient property to pay this bill. North Canton Store By <u>[Signature]</u> Mgr.				
Sworn to and subscribed before me this 30th. day of August 1935 <u>[Signature]</u> Ordinary;				

WE APPRECIATE YOUR BUSINESS
IT IS A PLEASURE TO SERVE YOU

\$ 30.00 104.50

CANTON, GA. Sept. 3 1935

RECEIVED OF JACOB MASSEY, ORDINARY, CHEROKEE COUNTY, GEORGIA

One Hundred & Four & 50/100
THIRTY and NO/100

DOLLARS

IN FULL SETTLEMENT OF CONFEDERATE PENSION FOR Funeral Expenses Mrs. S.E. Edge 193

WITNESS

Jones Mercantile Co.

By [Signature]
Cashier

THE ACCOMPANYING CHECK WILL NOT BE PAID UNLESS THIS VOUCHER IS PROPERLY SIGNED AND WITNESSED.
AND REMAINS ATTACHED TO CHECK

WITNESS

J. Massey

Jones, Mortuary Co.

W. J. Russell

THE ACCOMPANYING CHECK WILL NOT BE PAID UNLESS THIS VOUCHER IS PROPERLY SIGNED AND WITNESSED.
AND REMAINS ATTACHED TO CHECK

I, Jacob Massey, Ordinary of said County, do hereby certify that the within and foregoing is a correct copy of the death of Mrs. Sara Ellen Edge as appears of file in this office.

This Sept. 11, 1935

Jacob Massey Ordinary

I, Jacob Massey, Ordinary of said County, do hereby certify that the within and foregoing is a correct copy of the death of Mrs. Sara Ellen Edge as appears of file in this office.

This Sept. 11, 1935

Jacob Massey Ordinary

\$ 30.00

CANTON, GA., November 14 1935

RECEIVED OF JACOB MASSEY, ORDINARY, CHEROKEE COUNTY, GEORGIA

THIRTY AND No/100 DOLLARS

part payment funeral expense Mrs. S.E. Edge
IN FULL SETTLEMENT OF CONFEDERATE PENSION FOR 193

WITNESS

Elmer manous

PAYEE SIGN HERE

Long Paul C.

THE ACCOMPANYING CHECK WILL NOT BE PAID UNLESS THIS VOUCHER IS PROPERLY SIGNED AND WITNESSED,
AND REMAINS ATTACHED TO CHECK

IN FULL SETTLEMENT OF CONFEDERATE PENSION FOR 193

WITNESS

PAYEE SIGN HERE

Elmer manous

Long

THE ACCOMPANYING CHECK WILL NOT BE PAID UNLESS THIS VOUCHER IS PROPERLY SIGNED AND WITNESSED, AND REMAINS ATTACHED TO CHECK

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. Cause of death should be stated in plain terms, so that it may be understood by those who read it. Exact statement of occupation is very important. Was disease or injury caused by disease or injury contracted elsewhere? Where was disease contracted if not at place of death?

CERTIFICATE OF DEATH
GEORGIA DEPARTMENT OF PUBLIC HEALTH
 Bureau of Vital Statistics

1. PLACE OF DEATH Registered No. 12

County Cherokee Militia District (Number and Name) Ball Ground, 1032 State of Georgia

City or Town Ball Ground Length of residence in this city or town: Yrs. Mos. Ds. **NON-RESIDENT (Yes or No)**

Street and Number (No.) (Street) Ward

(If death occurred in a hospital, give its name instead of street and number)

2. FULL NAME Sara Ellen Edge

Residence (City or Town) (Street and Number) (State)

PERSONAL AND STATISTICAL PARTICULARS

3. SEX female 4. COLOR or RACE White 5. Single, Married, Widowed, Divorced (write the word) Widow

6. DATE OF BIRTH (month, day, year) Dec. 10-1845

7. AGE 81 Years 7 Months Days If less than one day: Hours Minutes

8. OCCUPATION

(a) Trade, profession or particular kind of work done, as spinner, weaver, bookkeeper, etc. Domestic

(b) Industry or business in which work was done, as cotton mill, sawmill, brick, etc.

(c) Date deceased last worked at this occupation (month and year)

(d) Total years spent in this occupation

9. BIRTHPLACE (P. O. Address) South Carolina

10. NAME Joe S. Spears

11. BIRTHPLACE (P. O. Address) South Carolina

12. MAIDEN NAME Miss Mackissie

13. BIRTHPLACE (P. O. Address) South Carolina

14. INFORMANT (Signed) Carl Edge
 (Address) Canton, Ga.

15. BURIAL PLACE (Cemetery) Shiloh
 (Postoffice) Date Aug. 15-35

20. UNDERTAKER (Signed) Jones Mer. Co
 (Address) Canton, Ga.

MEDICAL CERTIFICATE OF DEATH

16. DATE OF DEATH Aug. 14-1935 5 P. M.
 (Month, Day, Year) (Hour)

17. I HEREBY CERTIFY, That I attended the deceased from to to

I last saw him alive on 19 , death is said to have occurred on the date and hour stated above. The principal cause of death and related causes of importance in the order of onset and duration of each:

Broken Hip and old age.

Other contributory causes of importance:

What test confirmed diagnosis? (Specify whether autopsy, operation, laboratory, or clinical)

If death was due to external causes (violence) fill in also the following:

Was injury an accident, suicide, or homicide?

Where did injury occur (Specify city or town, if outside of limits, the county, and also the state)

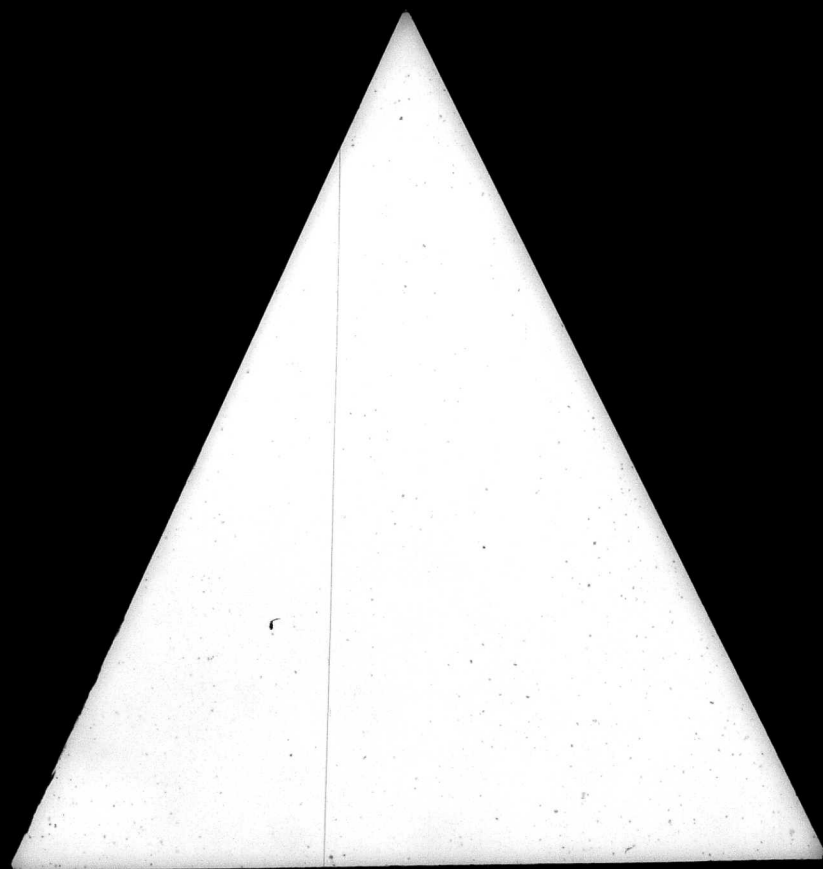
Did injury occur in a home, public place or industry?

Manner of injury

Nature of injury

(Signed) M.D.
 (Address)

18. FILED Aug. 31, 1935 19
 (Signed) A.A. Stoner
 (Name, Position)



Ordinary's Certificate

STATE OF GEORGIA,

Marble COUNTY }

I, J. M. Scott Ordinary of said County, certify that I know the applicant, Alfred Edwards, for pension is the person he represents himself to be and resides in said county. That I also know J. A. Hanson the witness swearing to the service; that they are both residents of said county and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 11th day of Aug 1964

J. M. Scott Ordinary
of Marble County }

(SEAL)

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the witnesses you give shall be the whole truth. So help you God." 2. All affidavits must be made before the Ordinary of the county in which the applicant or witness resides and must be certified by said Ordinary.

Edwards, Alfred
Cherokee Co Ga

No. 1
Call for 1920

Confederate Soldier's Application

Under Act 1910—As Amended by Act of 1919.

County Cherokee
Name Alfred Edwards
Company E
Regiment 23d Reg
Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

7/256-1919

Exchanged with
18-65-1919
W. R.
Witness Hanson
about 7 months
Apr. 30-64

COUNTY.

Sworn under my hand and official seal of office this 11 day of Aug 1919

of J. W. Sallapfel Ordinary }
Cherokee County. }
 (SEAL)

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

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

3. All affidavits must be made before the Ordinary of the county in which the applicant or witness resides and must be certified by such Ordinary.

Soldier's Application

Under Act 1910—As Amended by Act of 1919.

County Albermarle

Name Alfred Edwards

Company _____

Regiment 23d Yz.

Approved _____

J. W. LENDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

STATE OF GEORGIA.

COUNTY

1. What is your name and where do you reside? (Give County and Post-office) Alfred
Edwards, Wabasha Ga. Cherokee County.

2. How long and since when have you been a continuous resident citizen of this State? 27 years

3. Did you enlist in the Army of the Confederate States or in the organized militia of this State from 1861 to 1865? No

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) Aug. 1861. Camp McDowell Co. Geo. 23d Reg.

5. How long did you remain in the actual military service with said Company and Regiment? (Give date of discharge) From Aug. 1861 - till Apr. 1865

6. When and where was your Company and Regiment surrendered or discharged from the Service?
Apr 1865. I was not present at with my Company

7. Were you actually present with your command when it was surrendered or discharged? no

8. If you were not actually present, state specifically and clearly where you were. I was at
Homer Ga. on my way home

a. Where was your command when you left it? Fort-Harrison Virginia

b. When did you leave the command? September 1864

c. For what cause did you leave? was Captured

d. By whose authority did you leave? -----

e. For how long was your leave granted? In what way? _____

f. Why did you not return to your command after leave expired? _____

g. In what way were you prevented? -----

h. What effort did you make to return? -----

i Were you captured during the war? *Yes.*

i If so, when and where? In what prison were you held and when released?

September 1864, at Fort Harrison, Nicaragua. P. 1-1 "

out. Maryland; March 17th 1866; was on my way home at time of burning

9. Are you drawing a pension or any amount from this State or the United States? no

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

Sworn to and subscribed before me, this the 14th day of April, 1911.

11" 3-6 Aug 1918 } Alfred Edwards

day of 15 1922

----- *J. M. Sells* Ordinary)

✓ Chenoté

SEAL

00000)

changed to
 18 - C.S. Fairbairn
 W. R.
 Wittman, Harland
 Reagent, Wm. and
 Apr. 30 - 64

Questions for Witness as to Service

STATE OF GEORGIA,

COUNTY.

J. A. Hanson of said State and County is hereby presented as a witness in support of the application of Alfred Edwards for the pension provided by the Act of 1910, as amended by the Act of 1919 in said State, and, after being sworn true answers to make to the questions propounded, answers as follows:

1. What is your name and where do you reside? J. A. Hanson
Hanton Ga. Cherokee County
2. How long and since when have you known Alfred Edwards the applicant?
67 yrs since 1862.
3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State, and how do you know? Wahala Ga. Cherokee County
I live just 8 miles from Mr Edwards.
4. When, where and in what Company and Regiment did Alfred Edwards enlist during war from 1861 to 1865? (Give date and place.) Dec. 28. Ga.
5. How did you obtain your information of this Service? I belonged to the
2nd Co. 1st Regt. 1862. He was only days
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give date.) From March 1862 till Feb. 1864
and served in the War and was discharged.
7. When and where was his command surrendered or discharged (give date and place)?
Do not know.
8. Were you personally present at the surrender? No.
9. If not, where were you and how came you there? I was home on furlough.
I got furlough from Hospital at Savannah.
10. Was the applicant personally present with his command at surrender? Do not know
11. If not where was he and how came him there?
12. When did he leave his command? Where was his command when he left it? For what cause did he leave? By whose authority did he leave? and how long was he granted leave? How do you know all that you have stated to be true? If of your own knowledge, tell clearly and specifically.
13. In what way was he prevented from returning to his command? How do you know?
14. What effort did he make to return to his command and how do you know?
15. Was applicant captured as a prisoner? If so, when and where? In what prison was he held? and when released

Sworn to and subscribed before me, this the

11 day of Aug 1914.

J. M. Lafford Ordinary
of Cherokee County.

(SEAL)

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,

Gilmer County.

J. F. Williams of said State and County is hereby presented as a witness in support of the application of Alfred Edwards for the pension provided by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded answers as follows:

1. What is your name and where do you reside? J. F. Williams - Gilmer Co. - P.O. Toxeting River Ga. R-1
2. How long and since when have you known Alfred Edwards the applicant? 57 years - and since Oct. 1861.
3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? At Hadestka Cherokee Co. - Do not know how long a resident of State - Have been at his home
4. When, where and in what Company and Regiment did Alfred Edwards enlist during war from 1861 to 1865? (Give date and place) When enlisted in Oct. 1861. I found him already a member of Co. G. 23rd Regt.
5. How did you obtain your information of this Service? By being there
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) 24 months - from Oct 1861 to Aug 1864.
7. When and where was his Command surrendered or discharged (give date and place) Was not
8. Were you personally present at the Surrender? No
9. If not, where were you and how came you there? I was at home as a paroled prisoner.
10. Was the applicant personally present with his Command at surrender? No
11. If not where was he and how came him there? He was at home as a paroled prisoner
12. When did he leave his Command? About Sept 1864 Where was his Command when he left it? Fort Harrison Va. for what cause did he leave? Was captured
By whose authority did he leave? ----- and how long was he granted leave? ----- How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) Stays in prison with him at Point Look Out Md. from Sept 1864 to March 1865. When was released.
13. In what way was he prevented from returning to his Command? In prison or under parole How do you know? Was with him and know the fact.
14. What effort did he make to return to his Command and how do you know? He was a prisoner or under parole
15. Was applicant captured as a prisoner? Yes If so, when and where? Sept 1864.
In what prison was he held? Point Look Out Md. and when released by parole March 1865.

Sworn to and subscribed before me, this the

26th day of August 1919

J. R. Allen

Ordinary,

of Gilmer County.

Marriage License

AND

of Marriage Licenses

ORDINARY

GEORGIA, CHEROKEE COUNTY.

I, Jacob Massey, Ordinary and ex-officio clerk of the Court of Ordinary, do hereby certify that I have compared the foregoing of marriage license 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 hereunto set my hand and affixed the seal of the Court of Ordinary.

This Dec. 20th 1921.

Jacob Massey
Ordinary and ex-officio C.O.C.

STATE OF GEORGIA,

Gilmer County.

I, *J. C. Allen*, 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 he is disabled, as he claims, and I know he is the individual he represents himself to be, and that he resides in this County and has been a bona fide resident since the _____ day of _____ 18____

I also certify that the witnesses, to-wit: *J. F. Williams* _____ and _____ are persons of respectability, that their statements are worthy of full credit and belief, and that the full text of the affidavit was read to and understood by them before they signed the same.

Given under my official signature and seal, this *30th* day of *August* 19*21*.

J. C. Allen
Ordinary *Gilmer* County.

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

STATE OF GEORGIA, *Cherokee* County

I, *Jacob Massey*, Ordinary of said County, do certify that I personally know *Delia Edwards*, the applicant, and that she is the lawful widow of *Alfred Edwards*, and was on the *the* Pension Roll of said *Cherokee* County, and was paid a Pension from *Cherokee* County for 19*21*, and at the time of his death on the *5th* day of *Sept* 19*21*, there was due to him and unpaid his Pension of *one hundred* Dollars from the State of Georgia, and I know _____, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this *20* of *Dec*, 1921.

(SEAL) *Jacob Massey* Ordinary, *Cherokee* County.

1921

Application for Pension Due Deceased Soldier

UNDER ACT 1891 To be paid his Widow or Dependent Children

BY

Mrs. Delia Edwards
Widow of *Alfred Edwards*
of *Cherokee* County

Co. *Regt.* *Sept 5* 19*20*
Date of Death

Approved and ordered paid.

1921.

J. W. LINDSEY,
Commissioner of Pensions.

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

Alabama Printing Co. Atlanta, Ga.

Due only the 1920 new

GEORGIA, *Cherokee* County.

I hereby authorize and constitute *J. A. Edwards*, of said County, my lawful attorney to collect, and receipt for me in my name, for the Pension due me for 192*1*, through my deceased husband, *Alfred Edwards*, who was on *the* Pension Roll and paid from *Cherokee* County for 19*20*.

Witness my hand this *20* day of *Dec*, 192*1*.

Attested before me: *Jacob Massey Ordg* } *Delia Edwards*

Application for Pension Due Deceased Soldier

(To Be Paid to His Widow or Dependent Children)

UNDER ACT APPROVED OCTOBER 9, 1891

STATE OF GEORGIA, Cherokee County

Personally before me comes Mrs. Delia Edwards, of said County, who after being duly sworn, on oath says that she is the widow of Alfred Edwards who was duly enrolled as a Confederate Pensioner from the County of Cherokee and was paid a Pension of one hundred Dollars from Cherokee County for 1922, and that the said Alfred Edwards died in Cherokee County on the 5 day of Sept, 1922, and at the time of his death a Pension of \$100.00 was due him from Cherokee County and unpaid for 1922. Applicant further swears that she married the said Alfred Edwards on the 14 day of Feb, 1888, in Cherokee County and State of Ga, and resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks that the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this 20 day of Dec, 1921.

James Murray, Ordinary,
Cherokee County.
(SEAL.)

Delia Edwards (L. S.)

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, _____ County

Personally before me comes _____, who on oath says that he knew _____ while in life and that he knows Mrs. _____, the above applicant; that he knows that the said _____ and _____ were in due form of law married in the County of _____ in the State of _____ 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 _____, 19____, and I now know that she is his dependent widow.

Sworn to and subscribed before me this _____ day of _____, 1921.

_____, Ordinary,
_____, County.
(SEAL.)

Note 1st—This form can be used by guardian or minor children where there is no widow.
2d—Ordinary must send in all cases certificate of marriage attached hereto, if marriage is not proven by witness.
3d—This form is for widows of Disabled soldiers who died after October 26th and for widows and dependent children of Service soldiers who died after January 1st.
4th—Ordinary should examine the blank carefully and see that it is fully and correctly completed, and the seals affixed, and that the book, when folded, is filled out.
5th—Pay out no money on this application until it is approved in the Pension Office, and returned to you as your authority to pay.
6th—Return this application with your final settlement to the Pension Office.

of ~~amount~~ and was paid a Pension of ~~one hundred~~
Dollars from Schenectady County for 1920, and that the said
Agnes Edwards died in Schenectady County on
the 5 day of Sept, 1920, and at the time of his death a Pension of \$100
was due him from Schenectady County and unpaid for 1920.
Applicant further swears that she married the said Agnes Edwards on
the 14 day of Feb, 1918, in Schenectady County and
State of N.Y., and resided with him from the date of marriage to his death as his
lawful wife, and is now his dependent widow, and she asks that the Pension so due and unpaid be
paid to her.

Sworn to and subscribed before me this 20 day of Dec, 1921.
James Murray Ordinary. Agnes Edwards (L. S.)
Schenectady County. (SEAL.)

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, County

Personally before me comes _____, who
on oath says that he knew _____ while in life
and that he knows Mrs. _____, the
above applicant; that he knows that the said _____
and _____ were in due form of law married in the County
of _____ in the State of _____ on
the _____ day of _____, 19____, and that they resided together
as husband and wife from date of marriage to the day of his death on the _____ day of
_____, 19____, and I now know that she is his dependent widow.

Sworn to and subscribed before me this _____ day of _____, 1921.

_____, Ordinary.
_____, County.
(SEAL.)

Note 1st—This form can be used by guardian or minor children where there is no widow.
2d—Ordinary must send in all cases certificate of marriage attached hereto, if marriage is not proven by witness.
3d—This form is for widows of Disabled soldiers who died after October 26th and for widows and dependent children of Service
soldiers who died after January 1st.
4th—Ordinary should examine the blank carefully and see that it is fully and correctly completed, and the seals affixed, and that the
back, when folded, is filled out.
5th—Pay out no money on this application until it is approved in the Pension Office, and returned to you as your authority to pay.
6th—Return this application with your final settlement to the Pension Office.

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
....., 19...., and I now know that she is his dependent widow.

Sworn to and subscribed before me this day of 1921.

..... Ordinary }
..... County }
(SEAL.)

Note 1st—This form can be used by guardian or minor children where there is no widow.
2d—Ordinary must send in all cases certificate of marriage attached hereto, if marriage is not proven by witness.
3d—This form is for widows of Disabled soldiers who died after October 26th and for widows and dependent children of Service
soldiers who died after January 1st.
4th—Ordinary should examine the blank carefully and see that it is fully and correctly completed, and the seals affixed, and that the
book, when folded, is filled out.
5th—Pay out no money on this application until it is approved in the Pension Office, and returned to you as your authority to pay.
6th—Return this application with your final settlement to the Pension Office.

MARRIAGE LICENSE
STATE OF GEORGIA
COUNTY OF CHEROKEE

To any Judge, Justice of the Peace, or Minister of the Gospel
YOU ARE HEREBY AUTHORIZED TO JOIN
Alfred Edwards and *Delia Haynes*
in the Holy State of Matrimony, according to the Constitution and Laws of this
State and for so doing this shall be your License.
And you are hereby required to return this License to me, with your Certificate
hereon of the fact and date of the Marriage.
Given under my hand and seal this
Feb 1921 *O. A. Putnam* day of
ORDINARY (L. S.)

State of Georgia **CERTIFICATE** Cherokee County
I CERTIFY that *Alfred Edwards* and *Delia Haynes*
were joined in Matrimony by me this *17* day of *Feb* Nineteen Hundred
and *1888*
Recorded 19
ORDINARY
J. C. Avery, J. P.

Sworn to and subscribed before me this.....day of1921.

..... Ordinary }

..... County }

(SEAL.)

Note 1st—This form can be used by guardian or minor children where there is no widow.
2d—Ordinary must send in all cases certificate of marriage attached hereto, if marriage is not proven by witness.
3d—This form is for widows of Disabled soldiers who died after October 26th and for widows and dependent children of Service soldiers who died after January 1st.
4th—Ordinary should examine the blank carefully and see that it is fully and correctly completed, and the seals affixed, and that the book, when folded, is filled out.
5th—Pay out no money on this application until it is approved in the Pension Office, and returned to you as your authority to pay.
6th—Return this application with your final settlement to the Pension Office.

MARRIAGE LICENSE

STATE OF GEORGIA

COUNTY OF CHEROKEE

To any Judge, Justice of the Peace, or Minister of the Gospel

YOU ARE HEREBY AUTHORIZED TO JOIN

Alfred Edwards and *Delia Haynes*

in the Holy State of Matrimony, according to the Constitution and Laws of this State and for so doing this shall be your License.

And you are hereby required to return this License to me, with your Certificate hereon of the fact and date of the Marriage.

Given under my hand and seal this

Feb

1921

1st

day of

O. A. Putnam

ORDINARY

(L. S.)

State of Georgia

CERTIFICATE

Cherokee County

I CERTIFY that *Alfred Edwards*

and *Delia Haynes*

were joined in Matrimony by me this *1st* day of

Feb Nineteen Hundred

and *1888*
Recorded

19

ORDINARY

J. C. Avery

NAME Edwards, Alfred YEAR 1920 COUNTY Cherokee.

WHEN AND WHERE BORN? A resident of Georgia all my life.

ENLISTED WHEN AND WHERE? August, 1861, Camp McDonald, Ga.

RANK: Orderly Sgt. (witness states).

COMPANY AND REGIMENT? Company G, 23rd. Georgia Regiment.

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE? September, 1864, Fort Harrison, Va.,
and taken to Point Lookout, Maryland.

RELEASED: Released March 17, 1865 from Point
Lookout, Maryland.

WHEN AND WHERE SURRENDERED? Command surrendered:
April, 1865. Does not state where.

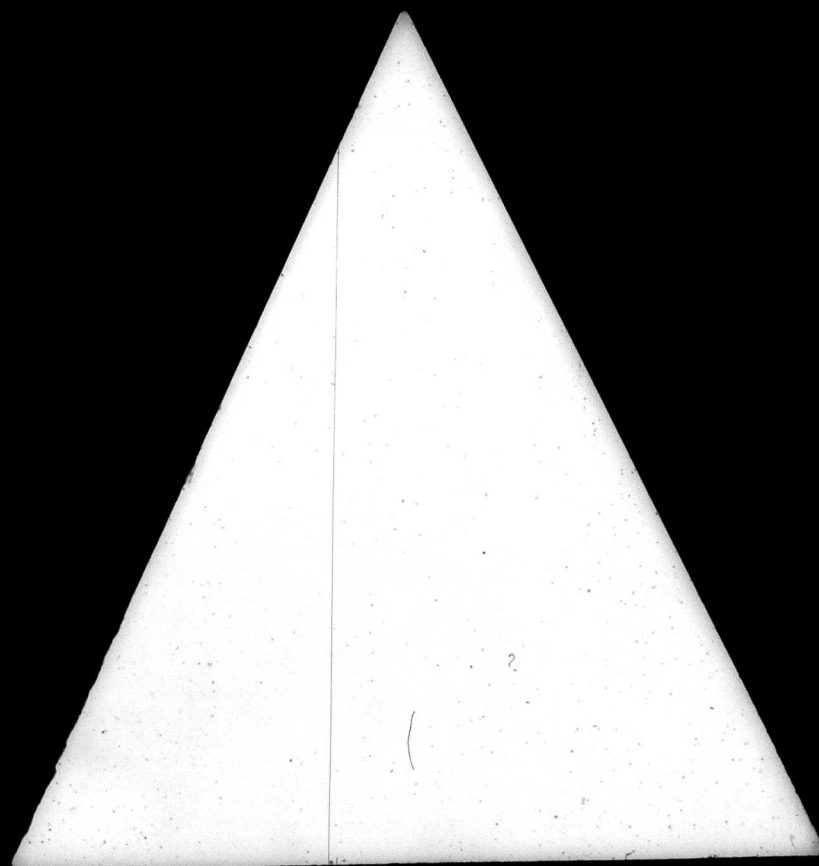
IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? I was at home ^{in Ga.} ~~or~~ on
my way home at time of surrender.

DIED, WHEN AND WHERE?

BURIED:

WITNESSES: J. F. Williams - same company
 J. A. Henson - same company. . . .No data.

SB.



1. Before any questions are answered the Ordinary shall read applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the whole truth, so help you God."
2. Additional affidavits may be attached if blank space are insufficient.
3. Only widows who married prior to January 1st, 1920, are entitled.
4. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary.
5. Attach verified copy of the application and license if obtainable. If not, prove marriage by some person of his general reputation.
6. Don't use the back of the application card.
7. Don't use the back of the application card.
8. Do not take an application from any widow who is already receiving a pension.

INSTRUCTIONS:

(SEAL OF ORDINARY)

Given under my hand and seal of office this 25 day of July 1937
Paul Mackey Ordinary,
 of Cherokee County.

I, Jacob Massey Ordinary of said County, do certify that I know Mrs. Amanda Edwards the applicant for pension; that she is the person she represents herself to be, and that she has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also know W. V. Chandler the witness who swears to the service of husband and/or the marriage; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

STATE OF GEORGIA,

Cherokee COUNTY.

Ordinary's Certificate

RECORD O. K.

Edwards, Amanda
Cherokee County
 Widow's Application

Under Act of 1910—As Amended by Act of 1919, and Constitutional Amendments of 1920 and 1937.

County Cherokee
 Name Amanda Edwards
 Widow of J. W. Edwards
 Date of Marriage Feb. 20, 1894
 Date of Husband's Death Feb. 20, 1934
 Company B. Co.
 Regiment 43rd Reg. P. S.
 Approved DEC. 27, 1937 1937
H. Massey Director.

JUL 29 1937

Mc County or date

State Dept. Public Welfare,
 Atlanta, Oct. 26, 1937.

John W. Edwards enlisted as a private in Co. B, 43d Regt Ga. Inf. Moh. 10, 1862..... Detailed Division Provost Guard Aug. 9, 1864. Lost arm near Atlanta, Ga., Aug. 9, 1864.

Director Confederate Records
 Div.

William Henderson
 Pensioner, Cherokee County,
 1879.

See
Wm. Henderson 1879

RECORD O. K.

Edwards, Amanda
Cherokee County
Widow's Application

State Dept. Public Welfare,
Atlanta, Oct. 26, 1937.

John W. Edwards enlisted
as a private in Co. B, 45d Reg
Ga. Inf. Mch. 10, 1862.....
Detailed Division Provost
Guard Aug. 9, 1864. Lost arm
near Atlanta, Ga., Aug. 9,
1864.

Director Confederate Records
Div.

Edward Edwards
Petitioner, Cherokee County,
1879.

See
Woodstock 1879

Under Act of 1910-As Amended by Act of
1919, and Constitutional Amendments
of 1920 and 1937.

County *Cherokee*
Name *Amanda Edwards*
Widow of *John W. Edwards*
Date of Marriage *Feb. 20 1864*
Date of Husband's Death *Mar 18 1864*
Company *B Co 45th Reg*
Regiment *43rd Reg*
Approved *DEC 27 1937*
Director *W. V. Chandler*

JUL 29 1937

Ordinary's Certificate

STATE OF GEORGIA,

Cherokee COUNTY.

I, *Jacob Massey*, Ordinary of said County, do certify
that I know *Mrs. Amanda Edwards* the applicant for pension; that
she is the person she represents herself to be, and that she has been, continuously, a bona fide resident
citizen of said State since January 1st, 1920; that I also know *W. V. Chandler*
the witness who swears to the service of husband and/or the marriage; that both of them are now residents
of said County and were duly sworn by me before signing the foregoing affidavits, and that they are
truthful and trustworthy and their statements are entitled to full faith and credit.

Given under my hand and seal of office this *28* day of *July*, 1937.
(SEAL OF ORDINARY) *Jacob Massey* Ordinary.
of *Cherokee* County.

INSTRUCTIONS:

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the whole truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1920, are entitled.
4. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary.
5. Attach certified copy of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Fill out the back of the application carefully.
7. Don't use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is easier to handle.
8. Do not take an application from any widow who is already receiving a pension.

APPLICATION FOR PENSION BY A WIDOW OF A CONFEDERATE SOLDIER

(Under Act of 1910, as Amended by Act of 1919, and Constitutional
Amendments of 1920 and 1937.)

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,

Cherokee COUNTY.

Personally appears before me, *Mrs. Amanda Edwards* of said State and County
and hereby applies for the pension allowed by the Act of 1910, as amended by the Act of 1919 and the
Constitutional Amendments of 1920 and 1937, and submits testimony to support the same, and, after
being duly sworn, true answers to make to the questions propounded, answers as follow, to wit:

SECTION I.

1. What is your name, and where do you reside? (Give Post Office and County).....
Amanda Edwards, Woodstock, Ga. Cherokee County
2. How long and since when have you been, continuously, a bona fide resident citizen of the State
of Georgia?..... *All my life*
Give date, or year, of your birth. *Aug. 14, 1856* Age? *80*
3. (1) When, (2) where and (3) to whom were you married? *Feb. 20, 1864, Cobb County, Ga.*
A. W. Edwards
 - a. Have you married since the death of first and soldier husband?..... *No.*
 - b. When and where did your first husband die?..... *Woodstock, Ga. Feb. 10, 1906*
 - c. Were you residing together when he died?..... *Yes*
 - d. If not, how long had you resided apart?.....
 - e. Are you now a widow?..... *Yes*
 - f. Have you your husband heretofore been paid a pension by the State?..... *Yes*
 - g. If so, when and for what cause were you or your husband placed on the roll? *lost arm in service.*

SECTION II.

Answer the following questions if your husband was not a pensioner:

1. When, where and in what Company and Regiment did your husband enlist as a soldier in
Confederate Army or Georgia Militia. (Give name of Colonel and Captain.) State whether Infan-
try, Cavalry, Artillery, Reserves, State Guards, State Militia or State Troops.
.....
2. When and where did the Commands of your husband surrender or discharge from the Service?
.....
3. Was your husband personally present with his Command when it was surrendered or discharged?
.....
4. If he was not present, state specifically and clearly where he was?
5. When did he leave the Command?
 - a. For what cause did he leave?.....
 - b. By whose authority did he leave?.....
 - c. For how long was his leave of absence granted?..... d. In what way?
6. What was his physical condition when he left his Command?
7. What effort did he make to return to his Command?
8. In what way was he prevented from going back to his Command?
9. Was he captured by the enemy at any time?
10. If so, when and where? In what prison was he held and when was he released?

Sworn to and subscribed before me, this the

28 day of *July*, 1937.
Jacob Massey Ordinary
of *Cherokee* County.
(SEAL OF ORDINARY)

Mrs. Amanda Edwards
Applicant.

An Affidavit

(Read carefully before making this affidavit.)

State of Georgia,

County of _____

Before me, the Ordinary of said County, comes Mrs. _____ who, after being duly sworn, deposes and says:

1. That she is an applicant for the Georgia pension allowed to widows of Confederate soldiers;
2. That her deceased husband was not a pensioner of the State of Georgia at the time of his death, and, therefore, his Confederate military service has not heretofore been proven in connection with an application for pension;
3. That she is unable to obtain from any person or source evidence as to the Confederate military service of her deceased soldier husband;
4. That this affidavit is being made to authorize the use, as evidence, of any official record of said Confederate military service as may be preserved either at the Capitol in Atlanta, or in the office of the Adjutant-General, Washington, D. C.

Sworn to and subscribed before me, this the _____

day of _____, 193_____

_____, Ordinary,

_____, County.

Questions for Witness as to Marriage and Service of Husband.

STATE OF GEORGIA,

Cherokee COUNTY.

W.V.Chanler

_____ of said State and County is hereby presented as a witness in support of the application of Mrs. Amanda Edwards for the pension provided by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendments of 1920 and 1937, in said State, who, after being sworn true answers to make to the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? (Give Post Office and County)
W.V.Chanler, Woodstock, Ga., Cherokee County
2. How long and since when have you known Mrs. Amanda Edwards applicant
about 50 years
3. Where does she now reside, and since when has she been, continuously, a bona fide, resident citizen of this State? Woodstock, Ga., Cherokee County, all her life
4. When and to whom was she married? J.W. Edwards, Feb. 20, 1894
5. How long and since when did you know J.W. Edwards her husband? 43 years. I am Mrs. Edwards' son and was at the wedding
6. When and where did W.V.Chanler, Woodstock, Ga., Cherokee County the husband of applicant, die? Feb. 10, 1906 At Woodstock, Ga., Cherokee County
7. Were the applicant and her husband living together as husband and wife at the date of his death?
Yes

8. If not, how long did they live apart before his death?
Were they divorced?

If the husband of the applicant was a pensioner, DO NOT answer the following questions.

9. When, where and in what Company and regiment did _____ enlist? (Give date and place).
10. How did you obtain your information of this service?
11. How long within your personal knowledge did he perform actual military service with this Company and Regiment? (Give dates.)
12. When and where was his Command surrendered or discharged? (Give date and place.)
13. Were you personally present with this Command when it was surrendered?
If not, where were you _____ and how came you there?
14. Was the husband of applicant personally present with his Command at its surrender?
If not where was he? _____ and how came him there?
When, where and for what cause did he leave his Command? (Give date.)
By whose authority did he leave his Command?
and how long was he granted leave?
How do you know all that you have stated to be true? (If of your own knowledge, state clearly and specifically).

15. For what 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?

17. Was he captured as a prisoner? _____ If so, when and where?
In what prison was he held? _____ and when released?

Sworn to and subscribed before me, this the _____

Feb. 10, 1937 day of Feb., 193_____, Ordinary
of Cherokee County.
(SEAL OF ORDINARY)

W.V.Chanler
(Witness)

WHEELER & STELL

GENERAL MERCHANDISE

WOODSTOCK, GA.

July 6th 1937

*This is to Certify that J. W. Watkins was
Present at the wedding of J. W. Edwards
and Mrs Amanda Chandler on Feb 20th
1894.*

*Sworn to and Subscribed
before me this 6th day
of July 1937*

Signed

J. M. Watkins

*J. G. Stell
M. P. Cherokee Co
890 District*



*We recommend and sell
Dr. LeGear's Remedies for Poultry and Live Stock*

STATE DEPARTMENT OF PUBLIC WELFARE

HURT BUILDING

ATLANTA

Honorable Jacob Massey, Ordinary,
Cherokee County,
Canton, Georgia.

WHEREAS:

MRS. AMANDA EDWARDS, WIDOW OF JOHN W. EDWARDS,

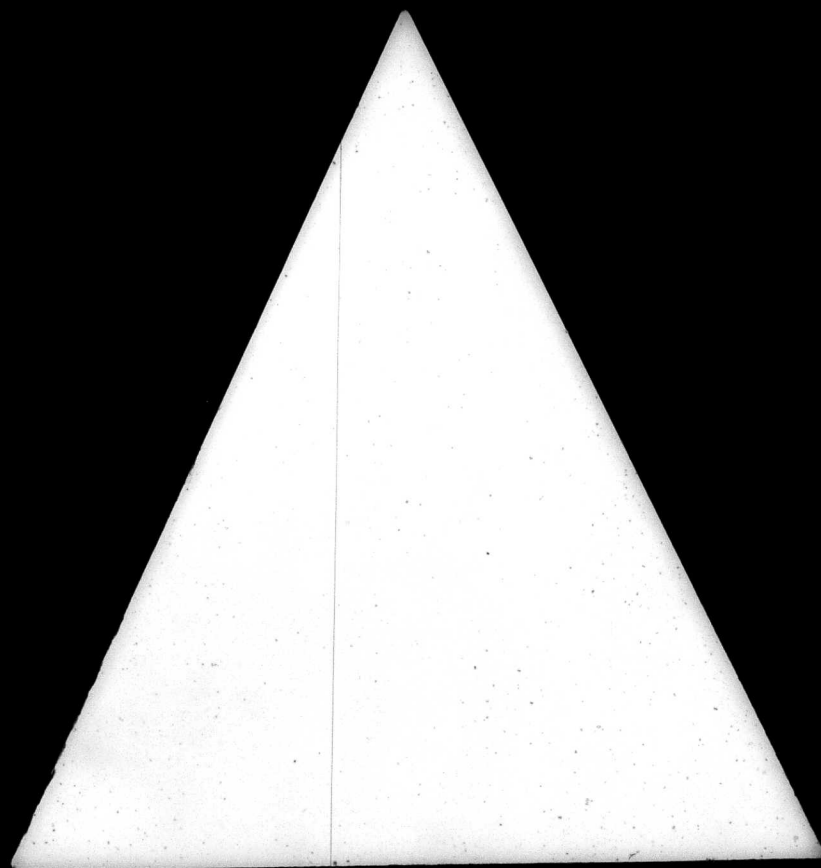
has filed in this office an application for the Georgia pension allowed to widows of Confederate veterans; and it appearing that the late husband of this applicant performed actual military service as a Confederate soldier and was honorably separated from such service; and that applicant was married to said soldier prior to January 1st, 1920, and that she was not remarried; it is, therefore,

ORDERED:

That said applicant be admitted to the pension roll of the State of Georgia for the month of January, 19 38, and thereafter; and that a copy of this order be sent to the Ordinary of said County.

This, the 27th day of December 19 37.

R. H. Green
Director, Confederate Division
State Department of Public
Welfare



Edwards, Henry H.
Cherokee Co.

OK No for 1911

**Confederate
Soldier's Application.**

✓ UNDER ACT 1910.

County Cherokee
Name Henry H Edwards
Company "B"
Regiment 23rd
Approved [Signature]

1954
J. W. LINDSEY,
Commissioner of Pensions
CHAS. F. BYRD, State Printer, Atlanta.
10/24/10



APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,

Cherokee County.

Henry H. Edwards of said State and County, hereby applies for the pension provided by Act of 1910, to Confederate Soldiers, and submits his sworn statement, with his testimony to make out the same, and after being duly sworn true answers to make to the questions propounded, answers as follows, to wit:

1. What is your name and where do you reside? (Give County and Post-office) Henry H. Edwards, Residence Cherokee Co. Ga. Post Office Rts. 1 & 2
 2. How long and since when have you been a continuous resident citizen of this State? Since 1870.

3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? yes from this date

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) Sept. 5, 1864, at Anniston, Ga. Comp. B. 23rd Reg. Inf. Ga.

5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) from Sept. 5, 1864, till 26 Aug. 1865

6. When and where was your Company and Regiment surrendered or discharged from the Service? April 26, 1865, at Anderson, N.C.

7. Were you actually present with your Command when it was surrendered or discharged? yes

8. If you were not actually present, state specifically and clearly where you were. I was there

a. Where was your Command when you left it? near left

b. When did you leave the Command? —

c. For what cause did you leave? —

d. By whose authority did you leave? —

e. For how long was your leave granted? In what way? —

f. Why did you not return to your Command after leave expired? —

g. In what way were you prevented? —

h. What effort did you make to return? —

i. Were you captured during the war? No.

j. If so, when, and where? In what prison were you held and when were you released? —

9. What property of every description was owned, in the use, possession and control of yourself and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value). 15.4 acres of land \$800.00, 1 mule \$75.00, Cow \$50.00, One Hog \$2.00, Wagon & Box \$25.00, Horse held \$50.00.

10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov. 1908. To whom and for what price? None.

11. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemized list). 15.4 acres land \$800.00 - 2 mules \$140.00, One Cow \$50.00, Wagon & Box \$25.00, One Hog \$2.00, Horse held \$50.00.

12. What annual or monthly income or earnings of yourself and wife and the source derived have you? None, except my labor

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

14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? No.

Sworn to and subscribed before me, this the 6 day of Sept, 1910, Henry H. Edwards

Cherokee Ordinary, Cherokee County.

Soldier's Application.

UNDER ACT 1910.

Confederate

No. for 1911

Edwards Henry H.
Cherokee Co. Ga.

County Cherokee

Name Henry H. Edwards

Company "B"

Regiment 23rd

Approved —

J. W. LINDSEY,

Commissioner of Pensions

CLARK P. BYRD, STATE PRINTER, ALABAMA.

10/24/10

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA.

Cherokee County.

Nathaniel Crossman of said State and County is hereby presented as a witness in support of the application of Nathaniel Crossman for the pension provided by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded, answers as follows:

1. What is your name and where do you reside? Nathaniel Crossman
Cherokee County, Georgia
2. How long and since when have you known Nathaniel Crossman the applicant?
known him 50 years
3. Where does he now reside, and since when has he been a bona fide continuing resident in this State and how do you know?
lives in this State 50 years
4. When, where and in what Company and Regiment did Nathaniel Crossman enlist during war from 1861 to 1865? (Give date and place) Sept. 1861, Regiment 1st Georgia, 2nd Co, 2nd Reg
5. How did you obtain your information of this Service? was a member of
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) until the surrender
7. When and where was his Command surrendered or discharged (give date and place).
April 26, 1865, Andersonville, Ga.
8. Were you personally present at the Surrender? I was
9. If not, where were you and how came you there?
10. Was the applicant personally present with his Command at surrender? He was present
11. If not where was he and how came him there?

12. When did he leave his Command? Where was his Command when he left it? for what cause did he leave? By whose authority did he leave and how long was he granted leave? How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically)

13. In what way was he prevented from returning to his Command? How do you know?
14. What effort did he make to return to his Command and how do you know?
15. Was applicant captured as a prisoner? No If so, when and where? In what prison was he held? and when released?

Sworn to and subscribed before me, this 22 day of Sept, 1912, Nathaniel Crossman Ordinary of Cherokee County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Cherokee County.

Personally before me comes J. P. Spivey & J. J. Spivey who on oath says that they are free holders residing in said County and know the applicant for pension and we know the property that is now in the use possession and control of himself and wife and of its cash value to wit: (Make List by Items and value) 1st. Cash of Land Val. \$7500 2nd. Two 1000 Acres Val. \$10000 3rd. Cash of Land Val. \$10000 4th. 1000 Acres Val. \$10000 5th. 1000 Acres Val. \$10000

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

1908? (State it fully by items)

2. When and to whom was it sold or given to?
3. What was the price paid or stated to be paid?
4. What relation is the party to applicant?
5. What disposition was made of the proceeds of the sale?
6. Was the disposition of this property made in good faith and full value?

or was it made to obtain a pension?
Sworn to and subscribed before me, this 22 day of Sept, 1912, J. P. Spivey Ordinary of Cherokee County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Cherokee County.

I, H. J. Webb Ordinary of said County, certify that I know the applicant Nathaniel Crossman for Pension is the person he represents himself to be and resides in said County. That I also know Nathaniel Crossman the witness swearing to the service and J. P. Spivey & J. J. Spivey who are free holders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Returns of Cherokee County shows that his and wife value for tax is in 1908 \$1409 for 1909 \$1168 for 1910 \$1320.

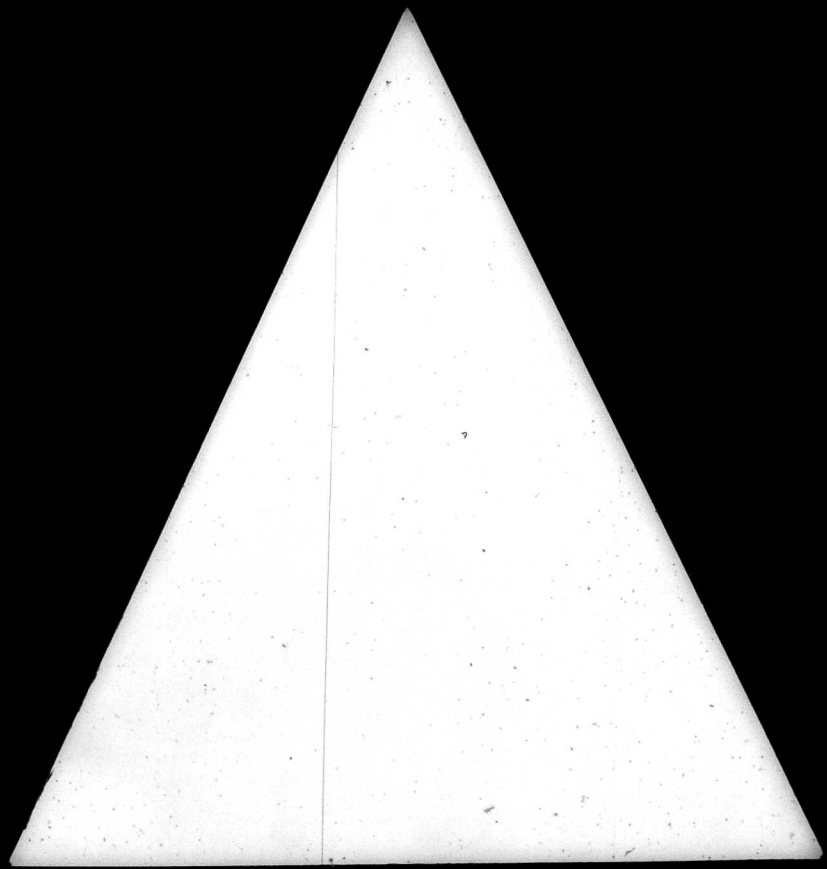
Sworn under my hand and official seal of office this 10 day of Oct, 1912, H. J. Webb Ordinary of Cherokee County.

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



Val. \$750.00 Two White Mules Value \$100.00 Each
\$150.00 Wagon & Harness \$200.00 Brown Haul \$300.00

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



Edwards, John W.
Edwards, John W.
No. *540* *Cherokee Co*

APPLICATION FOR

Artificial Arm

FOR CONFEDERATE SOLDIER.

John W. Edwards

County *Cherokee*

Limb *Right Arm*

Amount *\$60*

Date of Warrant *Dec 5th 1879*

Page *1879*

A. B. 431 Ry. M. 2

ERD
1937

STATE OF GEORGIA.

Cherokee County.

Personally appeared before me.....J. W. Edwards.....of
the county of.....Cherokee....., State of Georgia, who, being duly sworn, deposes
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 a.....Private.....
in Company.....B.....42nd.....Regiment of.....Georgia.....Volunteers
that while engaged in such military service, to-wit: at the battle or engagement of.....Shannon.....
in the State of.....Georgia.....on the.....14.....day of
.....August.....1864, he was wounded in the.....arm....., and
that the same was amputated.....above the elbow.....
that he has not received the payment allowed him for such limb under an Act entitled an Act to carry into
effect the last clause of Paragraph 1, Section 1, Article 7 of the Constitution of 1877, approved September
20th, 1879; that he has.....not.....applied himself with an artificial.....; or that, not having
done so, he prefers to supply himself with an artificial.....limb.....

Sworn to and subscribed before me this.....

.....24.....day of.....November.....1879.....J. W. Edwards

NOTE.—The above affidavit must be made before some officer authorized to administer oaths, a Judge of the Superior
or County Court, Justice of the Peace, Clerk of the Superior Court, or Ordinary.

COMMISSIONED OFFICER'S AFFIDAVIT.

STATE OF GEORGIA.

Cherokee County.

Personally came before me.....W. S. Riden.....of
the county of.....Cherokee....., State of Georgia, who, being duly sworn, depose
and says that he was.....2nd Lieutenant.....in Company.....B.....42nd.....Regiment
and that.....J. W. Edwards....., the above deponent, was a.....Private.....
in said Company, and that this deponent knows that said.....J. W. Edwards.....
lost a.....limb.....in the military service as said in the above affidavit.

Sworn to and subscribed before me this.....

.....24.....day of.....November.....1879.....W. S. Riden

NOTE.—If the affidavit of the commissioned officer is not obtainable, the following affidavit of three responsible citizens
must be furnished.

APPLICATION FOR

Artificial Limb

FOR CONFEDERATE SOLDIER

John W. Edwards

County.....Cherokee.....

Limb.....Right Arm.....

Amount.....\$60.....

Date of Warrant.....Dec 5th 1879.....

Page.....1879.....

Edwards, John W.
Edwards, John W.
No. 540 Cherokee Co

A. B. & C. H. H. H.

Co. B. & C. H. H. H.
1879

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 *bona fide* resident of this State, who enlisted in the military service of the Confederate States, or of this State, who, while engaged in said military service, lost a limb or limbs, may furnish to the Governor of this State proof that such applicant has supplied himself with such needful artificial limb or limbs, and the Governor, on reception of such proof, is hereby authorized to draw his warrant on the Treasurer of this State in favor of such applicant for either amount hereinafter mentioned, to-wit: For a leg extending above the knee, one hundred dollars; for a leg not extending above the knee, seventy-five dollars; for an arm extending above the elbow, sixty dollars, for an arm not extending above the elbow, forty dollars: Provided, the said amounts of money may be allowed to any one entitled to the benefits of this Act who may prefer to supply himself with the said artificial limb.

SEC. II. Be it further enacted by the said authority, 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 elbow or not; if a leg, whether extending above the knee or not, and the Governor shall decide the sufficiency of the proof submitted.

SEC. III. Be it further enacted by the said authority, That no applicant shall receive the sum allowed under this Act oftener than once in five years.

SEC. IV. Be it further enacted by the authority aforesaid, That all laws and parts of laws in conflict with this Act be and the same are hereby repealed.

HENRY E. GORTCHUIS,
Secretary House Representatives.
WM. A. HARRIS,
Secretary Senate.
Approved, September 10th, 1879.

A. O. BACON,
Speaker House Representatives.
RUFUS E. LARSEN,
President Senate.

ALFRED 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.....was amputated.....; that he is a bona fide
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.....18.....

STATE OF GEORGIA,

Cherokee County.)

I, Wm. P. Rutledge, Ordinary of Cherokee.....

county, do certify that I am well acquainted with.....John W. Edwards.....
the applicant for arm....., and am well satisfied that the facts stated by him in the foregoing
affidavit are true, and that I am well acquainted with.....Marah L. Puckett.....
.....the citizens who make their affidavit, that they are respectable citizens of this county, and that the facts
stated by them are true.

Given under my hand and official seal, this Twenty day of August.....

day of August.....1879.

Wm. P. Rutledge Ordinary.

Edward, John W.

Cherokee Co.

No. 1320.

APPLICATION FOR ALLOWANCE

FOR YEAR ENDING OCT. 26, 1889.

FOR

Lawrence, John W.

Applicant John W. Edward

County Cherokee

Amount 100

Date of Warrant May 13

Entered on Record,

May 13, 1889

Summary of Proceedings

No other proceedings

Applicant

STATE OF GEORGIA,

Cherokee County.

PERSONALLY appears J. W. Edwards of Cherokee county, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has been such continuously since the first day of December 1860; 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 Sergeant in Company B, of 43rd Regiment of Georgia Volunteers' Brigade; that whilst engaged in such military service, at the battle of on Peach near Atlanta in the State of Georgia, on the 9th day of August 1864, he was wounded as follows: in the right arm above the elbow in consequence of said wound the arm was amputated above the elbow

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

Sworn to and subscribed before me, this } J. W. Edwards.
the 25 day of February 1889. }
Ord. of Court

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

STATE OF GEORGIA,

County.

PERSONALLY comes before me Ordinary of said county, and , 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 188 }

ORDINARY.

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

STATE OF GEORGIA,

Cherokee County.

I, Oliver W. Putnam

Ordinary of said county,

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

are persons of respectability, and that their statements are worthy of full credit and belief.

I further certify that John W. Seligman before whom the foregoing affidavits were made and power of attorney was signed, is a residence of said county, and that the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 25 day of September 1887

Oliver W. Putnam

Ordinary Cherokee County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

KNOW ALL MEN BY THESE PRESENTS, That I,

of

county, in said State, do hereby appoint

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

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

day of

25

(L. S.)

Executed in the presence of us:

DIRECTION:

Send money to me as follows, by

to

P. O.

Cherokee County, Georgia.

NOTES.

1. If an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant and physician, and followed by a plain statement of fact showing the extent of the disability. If applicant claims disability from disease contracted in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proofs to the service.
2. The law makes no allowance for an arm or leg, unless the arm or leg has been rendered substantially and essentially useless.
3. It will not answer to say that an arm is "substantially useless for ordinary pursuits of life, etc." There is no qualification to the clause of the Act in reference to the arm or leg, but the limb must for all purposes be "substantially and essentially useless."
4. If the application is for a wounded leg, it would seem to be a fair construction of the Act, and the words above quoted, to say that unless the injury is such as to require the constant use of crutch or stick, that the leg is not "substantially and essentially useless."
5. If application is for loss of fingers or toes the proofs must be made to show the number, and points where amputated.
6. If papers are returned for correction, and amendments are added to any of the affidavits, the amendments must be made under oath before an officer, and the proofs must show that the amendments have been duly sworn to.
7. Every application must be certified by the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received in any case.

STATE OF GEORGIA,

Cherokee County.

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

I further certify that 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 4th day of February 1890.

O. W. Putnam

Ordinary Cherokee

County.

STATE OF GEORGIA,

Cherokee County.

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

I further certify that 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 24th day of February 1891.

O. W. Putnam

Ordinary Cherokee County.

Cherokee Co
Edwards, J. W.
1890.

No. 20057
APPLICATION FOR ALLOWANCE.

FOR THE YEAR ENDING OCTOBER 31, 1891.

J. W. Edwards
Applicant, J. W. Edwards
County, Cherokee

Amount, 100

Date of warrant, Feb 27

Entered on record, Feb 27

Feb 27 1890

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Feb 27

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

PERSONALLY appears J W Edwards of Cherokee county, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has been such continually since the December day of 1860; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Sergeant in Company B of 43th Regiment of Georgia Volunteers Stovalls's Brigade; that whilst engaged in such military service, at the battle of on Ricketts near Atlanta in the State of Georgia on the 9th day of August 1864, he was wounded as follows:

above the elbow of the right arm
which wound necessitated amputation near
the shoulder joint

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 one hundred dollars.

Sworn to and subscribed before me, this the 4th day of February 1891.

J W Edwards

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

KNOW ALL MEN BY THESE PRESENTS, That I,

of

county, in said State, do hereby appoint

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

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

day of

189

Executed in the presence of us:

[L. S.]

DIRECTION.

Send money to me as follows, by

to

P. O.

County, Georgia.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

PERSONALLY appears John W Edwards of Cherokee 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 first day of December 1860; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Sergeant in Company B, of 42th Regiment of Georgia Volunteers Stovalls's Brigade; that whilst engaged in such military service at the battle of Atlanta in the State of Georgia on the 9th day of August 1864, he was wounded as follows:

above the elbow of the right arm
causing the arm to be amputated above the elbow
on the same day of receiving the wound

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

one hundred dollars, for 1887-1891.

Sworn to and subscribed before me, this, the 4th day of February 1891.

J W Edwards

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

Know all Men by these Presents, That I,

of Cherokee County, State of Georgia, do hereby appoint

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

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

day of

1891.

Executed in the presence of us:

[L. S.]

DIRECTION.

Send money to me as follows, by

to

P. O.

County, Georgia.

STATE OF GEORGIA,

Cherokee County,

I, Oscar W. Pettmann

Ordinary of said county,

do certify that I am well acquainted with John W. Edwards the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this county.

Given under my official signature and seal, this first day of March 1892.

Oscar W. Pettmann

Ordinary Cherokee

County.

Edwards, J. W.
Cherokee
Co.
No. 47

SOLDIER'S PENSION.

1892.

FOR THE YEAR ENDING OCTOBER 31, 1892.

Name John W. Edwards

County Cherokee

Disability Loss of Arm

Amount \$100.00

Entered on record

Mar 3

1892.

W. H. HARRISON,

Secretary of Executive Department.

no data

AGENT.

Applicant

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

Cherokee Co.

POWER OF ATTORNEY.
STATE OF GEORGIA,

Cherokee County,

Know all Men by these Presents, That I

of Cherokee County, State of Georgia, do hereby appoint

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this first day of March 1892.

Executed in the presence of us:

Send money to me as follows, by

State of Georgia

Cherokee County, Georgia.

P. O.

1893
Edwards, J. W.
Cherokee
Co.
No. 47
Application for Allowance

Loss of Arm
Applicant J. W. Edwards
Cherokee
County, Ga.

Date of Warrant
March 3

Entered on record
Mar 3

Cherokee

WARRANT HARRIS TO

Applicant

no data

STATE OF GEORGIA,

For Applicants Heretofore Allowed Pensions.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

PERSONALLY appears *John W. Edwards*

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 *first* day of *Dec* 1862; 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 *Sergeant* in Company *B*, of *43* th Regiment of *Georgia* Volunteers *Stovall's* Brigade; that whilst engaged in such military service at the battle of *Atlanta* in the State of *Ga*, on the *9* day of *Aug*

1864, he was wounded as follows: *By your shot in right arm, made it necessary to be amputated before the elbow*

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1892. I have heretofore been allowed a pension of

one hundred Dollars for

Sworn to and subscribed before me this the

1 day of *March* 1892.

O. W. Palmer Ordinary.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

Know all Men by these Presents, That I,

of

County; in said State, do hereby appoint

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

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

day of *March* 1892.

Executed in the presence of us:

[L. S.]

DIRECTION.

Send money to me as follows, by

to

P. O.

County, Georgia.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

PERSONALLY appears *J. W. Edwards* of *Cherokee*

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 *1st* day of *December* 1862; 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 *Sergeant* in Company *B*, of *43* th Regiment of *Georgia* Volunteers *Stovall's* Brigade; that whilst engaged in such military service at the battle of *Atlanta* or *Burnside's Bridge* in the State of *Georgia*, on the *9th* day of *August* 1864, he was wounded as follows: *By your shot in right arm, made it necessary to be amputated before the elbow*

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1892. I have heretofore been allowed a pension of *one* dollars, for *the years 1890, 1891 & 1892*

Sworn to and subscribed before me, this, the

27th day of *March* 1892.

Almon C. Brown Ordinary.

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

STATE OF GEORGIA,

Cherokee County.

I, *Almon C. Brown* Ordinary of said County,

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

I further certify that before the foregoing affidavit was made and power of attorney was signed, is a true and correct copy of the original of the said affidavit, and the said affidavit and power of attorney are true and correct copies of the original of the said affidavit and power of attorney.

Given under my official signature and seal, this *27th* day of *March* 1892.

Almon C. Brown Ordinary *Cherokee* County.

STATE OF GEORGIA,

POWER OF ATTORNEY.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
COUNTY. }

Know all Men by these Presents, That I, _____

of _____

County, State of Georgia, do hereby appoint _____

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1894.

Executed in the presence of us _____

[L. S.]

DIRECTIONS.

Send money to me as follows, by _____

to _____

P. O.

County, Georgia.

POWER OF ATTORNEY.

STATE OF GEORGIA, }

County. }

KNOW ALL MEN BY THESE PRESENTS, That I, _____

of _____

County, State of Georgia, do hereby appoint _____

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

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

day of _____ 1895.

Executed in presence of us _____

[L. S.]

DIRECTIONS.

Send money to me as follows, by _____

to _____

P. O.

County, Georgia.

Edwardy John M.

(For Those Already Enrolled.)

No. *HH4*

Soldier's Pension.
1894.

Name *John M. Edwards*

County *Cherokee*

Disability *Loss of arm*

Amount, \$ *100*

3/14

1894.

W. H. HARRISON,

Secretary Executive Department.

WARRANT HANDED TO

Applicant

Geo. W. Harrison, State Printer, Atlanta.

No later

Edwardy John M.

(For Those Already Enrolled.)

No. *852*

SOLDIER'S PENSION.
1895.

Name *John M. Edwards*

County *Cherokee*

Disability *Loss of arm*

Amount, \$ *100.00*

3/14

1895.

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

Applicant

Geo. W. Harrison, State Printer, Atlanta.

No later

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Cherokee County.

PERSONALLY appears John W. Edwards of Cherokee 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 1st day of December 1860; 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 Sergeant in Company B, of 47th Regiment of Georgia Volunteers, Stovall's Brigade; that whilst engaged in such military service at the battle of Atlanta in the State of Georgia, on the 9th day of August 1864, he was wounded as follows: gunshot wound in right arm which caused the loss of said arm amputation near shoulder joint

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1894. I have heretofore been allowed a pension of one dollars, for the year 1892

Sworn to and subscribed before me, this, the 13th day of March 1894. J. W. Edwards
S. L. Linn, Clerk

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, }
Cherokee County.

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

Given under my official signature and seal, this 13th day of March 1894.



S. L. Linn
Ordinary of Cherokee County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Cherokee County.

PERSONALLY appears John W. Edwards of Cherokee 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 1st day of 1860; 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 Sergeant in Company B, of 47th Regiment of Georgia Volunteers, Stovall's Brigade; that whilst engaged in such military service at the battle of Atlanta in the State of Georgia, on the 9th day of August 1864, he was wounded as follows: gunshot causing loss of right arm

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26th, 1895. I have heretofore been allowed a pension of one hundred dollars, for the year 1891 & 1894

Sworn to and subscribed before me, this, the 2nd day of July 1895. John W. Edwards
S. L. Linn, Clerk

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, }
Cherokee County.

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

Given under my official signature and seal, this 2nd day of July 1895.



S. L. Linn
Ordinary of Cherokee County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, John W. Edwards hereby authorize

S. C. Brown of Cherokee

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

at Cherokee

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 5th

day of Feb 1902 1896.

John W. Edwards [I. S.]

Executed in presence of us

S. C. Brown

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize

of

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

at _____

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

day of _____ 1896.

STATE OF GEORGIA

[I. S.]

Executed in presence of us

Edwards, John W.
Cherokee Co.

(For Those Already Enrolled.)

No. 2126

SOLDIER'S PENSION.

1896.

Name John W. Edwards

County Cherokee

Disability Loss of arm

Amount, \$ 100.00

1896

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

Gen. W. Harrison, State Printer, Atlanta.

No data

Edwards, J. W.
Cherokee Co.

(For Those Already Enrolled.)

No. 2096

SOLDIER'S PENSION.

1896.

Name J. W. Edwards

County Cherokee

Disability

Amount, \$ 100.00

3/10 1896

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

Gen. W. Harrison, State Printer, Atlanta.

No data

STATE OF GEORGIA

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

STATE OF GEORGIA

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears John W. Edwards of Cherokee County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of December 1860; 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 Sergeant in Company B, of 43th Regiment of Georgia Volunteers, Stovall's Brigade; that whilst engaged in such military service in the State of Georgia, on the 9 day of August 1864, he was wounded, injured or diseased as follows:

Received a gunshot wound above elbow in right arm, said wound necessitating the amputation of the arm

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 28th, 1896. I have heretofore as a resident of Cherokee county been allowed a pension of one hundred dollars, for the year 1897.

Sworn to and subscribed before me, this, the 5th day of Feb 1896, } John W. Edwards.

A. B. Brown, Ord.

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

STATE OF GEORGIA,

Cherokee County.

I, A. B. Brown Ordinary of said County, do certify that I am well acquainted with John W. Edwards 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 5th day of Feb 1896 1896.



Ordinary Cherokee County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears John W. Edwards of Cherokee County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of December 1860; 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 Sergeant in Company B, of 43th Regiment of Georgia Volunteers, Stovall's Brigade; that whilst engaged in such military service in the State of Georgia, on the 7th day of August 1864, he was wounded, injured or diseased as follows:

Loss of right arm & dressing loss of said arm.

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 28th, 1896. I have heretofore as a resident of Cherokee county been allowed a pension of one hundred dollars, for the year 1895.

Sworn to and subscribed before me, this, the 11th day of Feb 1896, } John W. Edwards.

A. B. Brown

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,

Cherokee County.

I, A. B. Brown Ordinary of said County, do certify that I am well acquainted with John W. Edwards 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 11th day of Feb 1896.



Ordinary Cherokee County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____ of _____

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

at _____ IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1897.

[L. S.]

Executed in presence of _____

Edward W. Edwards
Cherokee County
ACT OF 24 OCT. 1867.

(For Those Already Enrolled.)

No. *3161*

INVALID

SOLDIER'S PENSION.

1897.

Name *John W. Edwards*

County *Cherokee*

Disability *Loss of arm*

Amount, \$ *100.00*

3/11 1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

Edwards

Geo. W. Harrison, State Printer, AT 4774.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County. }

I, *John W. Edwards* hereby authorize _____ of _____

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

at *Cherokee, Ga* IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of *March* 1898.

[L. S.]

Executed in presence of _____

Edwards

Edwards, John W.
Cherokee Co
ACT OF 24 OCT. 1867.

(For Those Already Enrolled.)

No. *3330*

INVALID

SOLDIER'S PENSION.

1898.

Name *John W. Edwards*

County *Cherokee*

Disability *Loss of arm*

Amount, \$ *100.00*

3/21 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

W. G. Thayer

Geo. W. Harrison, State Printer, AT 4774.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears John W. Edwards of Cherokee 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 1 day of December 1865; 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 volunteer in Company B, of 43th Regiment of Georgia Volunteers, Stovall's Brigade; that whilst engaged in such military service in the State of Georgia, on the 9 day of August 1864, he was wounded, injured or diseased of follows:

In the right arm above the elbow and wound causing amputation of the arm

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

Sworn to and subscribed before me, this, 24th day of July 1897, J. W. Edwards POST OFFICE

A. B. Brown
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,

Cherokee County.

I, A. B. Brown Ordinary of said County, do certify that I am well acquainted with John W. Edwards 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 24th day of July 1897.



A. B. Brown
Ordinary Cherokee County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears John W. Edwards of Cherokee 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 1 day of December 1865; 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 Sergeant in Company B, of 43th Regiment of Georgia Volunteers, Stovall's Brigade; that whilst engaged in such military service in the State of Georgia, on the 9 day of August 1864, he was wounded, injured or diseased as follows:

Sunshot wound above elbow in the right arm causing the arm to be amputated

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

Sworn to and subscribed before me, this, 24th day of July 1898, J. W. Edwards POST OFFICE

A. B. Brown
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,

Cherokee County.

I, A. B. Brown Ordinary of said County, do certify that I am well acquainted with John W. Edwards 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 24th day of July 1898.



A. B. Brown
Ordinary Cherokee County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County. }

I, J. W. Edwards, hereby authorize Wm. A. Wright
of Atlanta Ga

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 18th
day of March 1899.

J W Edwards [L. S.]

Executed in presence of

A. C. Cunningham

Edwards, John W.
Cherokee County

CODE SECTION 12A.

(For Those Already Enrolled.)

No. 3416

INVALID

SOLDIER'S PENSION.

1899.

Name J. W. Edwards
County Cherokee
Disability Loss of Arm
Amount, \$ 100.00 1899.
3/23

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

Wm

GEO. W. HARRISON, STATE PRINTER, ATLANTA

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County. }

I, John W. Edwards hereby authorize W. A. Wright
of Atlanta Ga

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 28
day of Feb 1900.

John W Edwards [L. S.]

Executed in presence of

J. S. Du Pre

Edwards, John W.
Cherokee Co.

CODE SECTION 12A.

(For Those Already Enrolled.)

No. 3073

INVALID

SOLDIER'S PENSION.

1900.

Name John W. Edwards
County Cherokee
Disability Loss of Arm
Amount, \$ 100.00
Warrant issued Apr 13 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Wright

GEO. W. HARRISON, STATE PRINTER, ATLANTA

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears J. W. Edwards of Cherokee 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 1st day of December 1860; 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 Sergeant in Company B, of 43rd Regiment of Georgia Volunteers, Stovall's Brigade; that whilst engaged in such military service in the State of Georgia, on the 9th day of August 1864, he was wounded, injured or diseased as follows:

Received a gunshot wound in the right arm above the elbow necessitating the amputation of the same

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 Cherokee County been allowed an invalid pension of one hundred Dollars, for the year 1898.

Sworn to and subscribed before me, this, the J. W. Edwards.

20th day of Feb, 1899. POST OFFICE

H. C. Brown Ordinary

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

STATE OF GEORGIA,

Cherokee County.

I, H. C. Brown Ordinary of said County, do certify that I am well acquainted with J. W. Edwards 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 20th

day of Feb, 1899.

H. C. Brown Ordinary Cherokee County.



For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears John W. Edwards of Cherokee County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State and County, and has resided therein continuously ever since the 1st day of December 1860; 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 Sergeant in Company B, of 43rd Regiment of Georgia Volunteers, Stovall's Brigade; that whilst engaged in such military service in the State of Georgia, on the 9th day of August 1864, he was wounded, injured or diseased as follows:

was wounded in the right arm making the amputation of said arm above the elbow necessary

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

Sworn to and subscribed before me, this, the John W. Edwards.

24th day of January 1900. POST OFFICE

H. C. Brown Ordinary

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

STATE OF GEORGIA,

Cherokee County.

I, H. C. Brown Ordinary of said County, do certify that I am well acquainted with John W. Edwards 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 24th

day of January 1900.

H. C. Brown Ordinary Cherokee County.



POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, John W. Edwards hereby authorize

A. C. Conn of Centerville Ga

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

by _____ at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 3

day of January 1901.

John W. Edwards [L. S.]

Executed in presence of

J. D. Ore

Edwards, John W.
Cherokee Co

CODE SECTION 1290

(For Those Already Enrolled.)

No. 2463

DISABLED

SOLDIER'S PENSION.

1901.

Name John W. Edwards

County Cherokee

Disability Loss of Arm

Amount, \$ 120.00

2/12 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

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

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, John W. Edwards hereby authorize Wm. A. Wright

of Atlanta Ga

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

A. C. Conn by check at Centerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 10

day of May 1903.

John W. Edwards [L. S.]

Executed in presence of

A. C. Conn

Edwards, John W.
Cherokee Co

CODE SECTION 1290

(FOR THOSE ALREADY ENROLLED.)

No. 2813

DISABLED

SOLDIER'S PENSION

1903.

Name John W. Edwards

County Cherokee

Co. B Regiment 48

Disability Loss of Arm

Amount, \$ 120.00

2/16 1903.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

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

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears John W. Edwards of Cherokee County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the day of Dec 1860, 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 Sergeant in Company B, of 43rd Regiment of Ga Volunteers, Stovall's Brigade; that whilst engaged in such military service in the State of Ga, on the 9 day of Aug 1864, he was wounded, injured or diseased as follows:

gunshot causing loss of right arm above the elbow

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

Sworn to and subscribed before me, this 1st day of Jan 1901. John W. Edwards Postoffice A. C. Loomis, Ga.

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

STATE OF GEORGIA,

Cherokee County.

I, A. C. Loomis Ordinary of said County, do certify that I am well acquainted with John W. Edwards 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 1st

day of Jan 1901.

A. C. Loomis
Ordinary Cherokee County.



FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears John W. Edwards of Cherokee County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the day of December 1860; 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 Sergeant in Company B, of 43rd Regiment of Georgia Volunteers, Stovall's Brigade; that whilst engaged in such military service in the State of Georgia, on the 9th day of August 1864, he was wounded, injured or diseased as follows:

Received gunshot wound in right arm above the elbow said wound causing the amputation of the arm near the shoulder joint

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

Sworn to and subscribed before me, this 1st day of Jan 1903. John W. Edwards Post-office A. C. Loomis, Ga.

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

STATE OF GEORGIA,

Cherokee County.

I, A. C. Loomis Ordinary of said County, do certify that I am well acquainted with John W. Edwards 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 1st

day of Jan 1903.

A. C. Loomis
Ordinary Cherokee County.



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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY.

I, J. W. Edwards hereby authorize

W. A. Wright of Comptroller General

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

A. C. Ginn by check

at Centerville

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 5th

day of July 1904.

J. W. Edwards [L. S.]

Executed in presence of

A. C. Ginn

Edwards, John W.
Cherokee Co.

COUS SECTION 1280.
(FOR THOSE ALREADY ENROLLED.)

No. 2265

DISABLED

SOLDIER'S PENSION
1904.

Name John W. Edwards

County Cherokee

Co. A Regiment 42^d

Disability Loss of arm

Amount, \$100.00

FEB 18 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Ordry
Gen. W. Harrison State Printer, Atlanta.

No date

Edwards, John W.
Cherokee Co.

COUS SECTION 1280.
(FOR THOSE ALREADY ENROLLED.)

No. 2230

DISABLED

SOLDIER'S PENSION
1905.

Name J. W. Edwards

County Cherokee

Co. B Regiment 42^d

Disability Loss of arm

Amount, \$100.

FEB 23 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Ordry
Gen. W. Harrison State Printer, Atlanta.

No date

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY.

I, J. W. Edwards hereby authorize

W. J. Webb of Cherokee County

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

me by mail

at Woodstock Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 28th

day of January 1905.

J. W. Edwards [L. S.]

Executed in the presence of

J. B. Medford N.P. & H.P.
of Cherokee Co.

Edwards, John W.
Cherokee Co.

COUS SECTION 1280.
(FOR THOSE ALREADY ENROLLED.)

No. 2230

DISABLED

SOLDIER'S PENSION
1905.

Name J. W. Edwards

County Cherokee

Co. B Regiment 42^d

Disability Loss of arm

Amount, \$100.

FEB 23 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Ordry
Gen. W. Harrison State Printer, Atlanta.

No date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears J. W. Edwards of Cherokee County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of December 1860; 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 Sergeant in Company B, of 43th Regiment of Georgia Volunteers Stovall's Brigade; that whilst engaged in such military service in the State of Georgia, on the 9th day of August 1864, he was wounded, injured or diseased as follows:

By a minnie ball in the right arm above the elbow. The wound necessitating the amputation of the arm just below the shoulder

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1904. I have heretofore, under said law, as a resident of Cherokee County, been allowed an invalid pension of one hundred Dollars, for the year 1903.

Sworn to and subscribed before me, this the 5th day of January 1904.

J. W. Edwards
Post-office Woodstock

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

STATE OF GEORGIA,

Cherokee County.

I, A. C. Lamm Ordinary of said County, do certify that I am well acquainted with J. W. Edwards 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 5th day of Jan 1904.

A. C. Lamm
Ordinary Cherokee County.

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

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears J. W. Edwards of Cherokee 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 first day of December 1860; 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 Sergeant in Company B, of 43th Regiment of Georgia Volunteers Stovall's Brigade; that whilst engaged in such military service in the State of Georgia, on the 9th day of August 1864, he was wounded, injured or diseased as follows:

Received gunshot wound in right arm above elbow making amputation of arm necessary

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1905. I have heretofore, under said law, as a resident of Cherokee County, been allowed an invalid pension of one hundred Dollars, for the year 1904.

Sworn to and subscribed before me, this the 2d day of January 1905.

J. B. Medford, N. P. Scott & P. Chisley & Co.
Post-office Woodstock

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

STATE OF GEORGIA,

Cherokee County.

I, M. J. Mober Ordinary of said County, do certify that I am well acquainted with J. W. Edwards 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 28th day of Jan 1905.

M. J. Mober
Ordinary Cherokee County.

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

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY.

I, John W. Edwards hereby authorize
N. J. Webb of Canton Ga.
to receive and receipt for the pension paid hereon, and request that he remit same to
me by check
at Woodstock.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 11
day of Jan 1906.

J. W. Edwards [L. S.]

Executed in the presence of

F. M. Webb

Edwards John W.
Cherokee County

Cons. Service 1860.
(FOR THOSE ALREADY ENROLLED.)

No. 1115

DISABLED
SOLDIER'S PENSION
1906.

Name John W. Edwards
County Cherokee
Co. R. Regiment 48th Ga.
Disability Lost Arm
Amount, \$10.00 2/11 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

The Pensioner's and Pensions Co., Geo. W. Northington, Sec.

No data

Sherokee

Maimed Soldiers.

Voucher No. 1320

Amount, \$ 100.

Paid to John W. Edwards
For Loss of right
Arm.

March. 13. 1889.

Included in Warrant No.

issued to Treasurer.

1889.

WARRANT CLERK

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

Applicant

Audited March 13 1889.
Wm. A. Wright
COMPTROLLER-GENERAL.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia.

Cherokee County.

Personally appears Jos W Edwards of Cherokee 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 11th day of December 1865; that he enlisted in the military service of the Confederate States, (or of the State of Georgia) during the war between the States, and served as a Sergeant in Company B, of 48th Regiment of Volunteers Stovall's Brigade; that whilst engaged in such military service in the State of Georgia, on the 9th day of August 1864, he was wounded, injured or diseased as follows:
Lost right arm near Atlanta

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1906. I have heretofore, under said law, as a resident of Cherokee County, been allowed an invalid pension of One hundred Dollars, for the year 1905.

Sworn to and subscribed before me, this the 15th day of Jan 1906.

J. W. Edwards

Post-Office Wardslock

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

State of Georgia,

Cherokee County.

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

Given under my official signature and seal, this 15th day of Jan 1906.

N. J. Noble Ordinary Cherokee County.

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

No. 1320

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga. Feb 13. 1889

Mr. John W. Edwards of the County of Cherokee 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

Loss of right arm

He is entitled to receive the sum of One Hundred & 00/100 Dollars for such disability, the same being the allowance due for the year ending October 24, 1889.

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



GOVERNOR.

By the Governor

W. N. Harrison

CLERK, EXECUTIVE DEPARTMENT.

100.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

One Hundred & 00/100 Dollars,

per above voucher, this 13 of March 1889.

J. W. Edwards

Audited _____ 1891.

COMPTROLLER-GENERAL.

Edwards, John W.

Chapman

1891.

Maimed Soldiers.

Voucher No. 1986

Amount \$ 100

Paid to John W. Edwards,
for Loss of arm

Met B 1891.

Included in warrant No.

issued to Treasurer.

1891.

WARRANT-CLERK.

Geo. W. Harrison, State Printer, Atlanta.

Applicant

Audited _____ 18

COMPTROLLER-GENERAL.

Maimed Soldiers.

Voucher No. 2054

Amount \$ 100

Paid to J. W. Edwards,
for Loss of arm

July 27 1890.

Included in warrant No.

issued to Treasurer.

18

WARRANT CLERK.

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

Applicant.

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

1891
No. ~~1896~~ 1986
Atlanta, Ga. March 3 1891.

Mr. John W Edwards of the County
of Cherokee having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Acts
approved Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for
Loss of Arm
He is entitled to receive the sum of One Hundred Dollars
for such disability, the same being the allowance due for the year ending October 24, 1891.

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

By the Governor,

W H Harrison
Sec'y EXECUTIVE DEPARTMENT.

\$ 100.00

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

One Hundred & 00/100 Dollars,
per above voucher, this 3 of March 1891.

J W Edwards

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

No. 2054
Atlanta, Ga. Feb 27 1890.

Mr. J. M. Edwards of the County
of Cherokee having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Act,
approved, Dec. 24, 1888, and the same having been examined and allowed for

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

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

By the Governor,

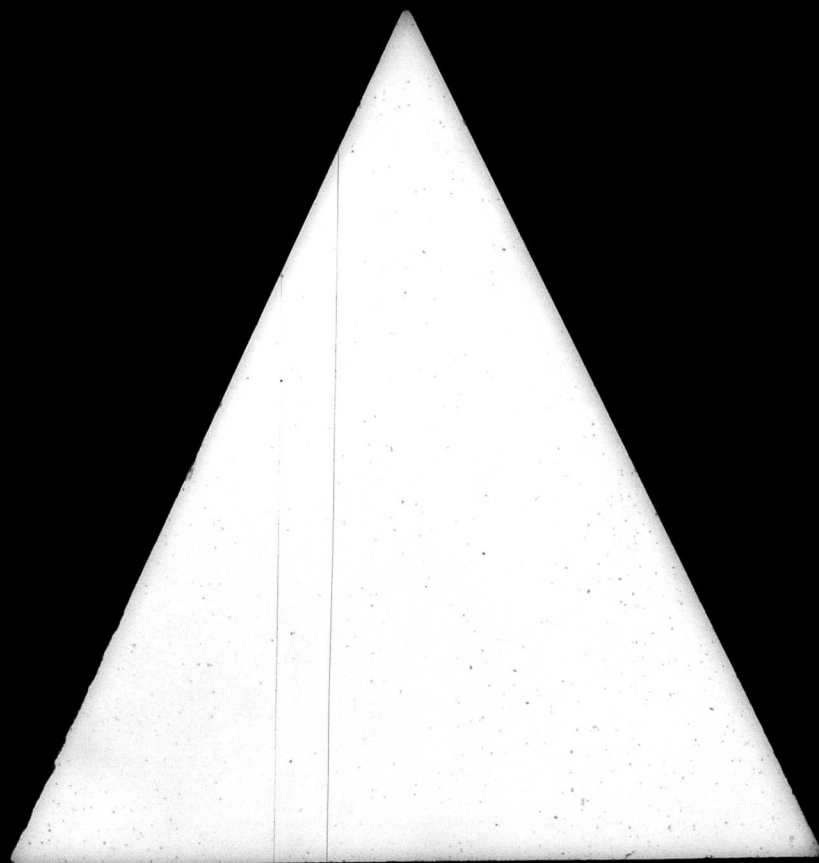
W H Harrison
CLERK EXECUTIVE DEPARTMENT.

\$ 100.00

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

One Hundred & 00/100 Dollars,
per above voucher, this 27 of Feb 1890.

J W Edwards



POWER OF ATTORNEY.

STATE OF GEORGIA.

County, _____

I, _____ hereby authorize _____

of _____ County to receive and receipt for the pension allowed and that he remit the same to me at _____ by his check or registered mail.

Witness my hand this _____ day of _____, 190 _____.

Executed in presence of _____

Ordinary, _____

County, _____

L. S.

[SEAL]

Pension office 11/26/08 that state which of enlistment of husband, that was such a Legion, was it a state or Confederate command, where and when was it surrendered, date of marriage, then prove all such statements to be true, by some one who knows of his own knowledge, witness admitted known, nothing.

J. F. Lindsey, Com. of Pens.

Edwards, Martha
Cherokee, County

No. _____

**WIDOW'S
INDIGENT PENSION.**

Name Martha Edwards

County Cherokee

Widow of M. A. Edwards

Approved _____

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO _____

G. F. BYRD, STATE PRINTER, ATLANTA, GA.

4/29/08

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize _____ of _____ County to receive and receipt for the pension allowed and that he remit the same to me at _____ by his check or registered mail.

Witness my hand this _____ day of _____ 190_____

Executed in presence of

Ordinary,

L. S.

County.

[SEAL]

Pension office 11/18/08 Must state month of enlistment of husband, what was Burk's Legion, was it a state or confederate command, where and when was it surrendered, give date of marriage, then prove all such statements to be true, by some one who knows of his own knowledge. Witness submitted knows nothing. J. W. Lindsey, Com. Of Pens.

Edwards, Martha
Cherokee County

WIDOW'S
INDIGENT PENSION.

Name Martha Edwards
County Cherokee
Widow of W. A. Edwards

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

U. S. DEPT. OF PENSIONS, ATLANTA, GA.

11/27/08

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

County.

Martha Edwards of said State and County, desiring to avail herself of the pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly, passed December 19, 1900, hereby submits her proof, 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 Postoffice.)
Martha Edwards Cherokee Co. Ga.
2. How long and since when have you been a resident of this State?
4 yrs
3. When and where were you born?
in Ga. 1830
4. When and where was your husband born—state his full name, and when were you and he married? (Attach copy marriage license in every case.)
Martha Edwards & Charles E. Edwards 1856
5. When and where and in what Company and Regiment did your husband enlist or serve during the war between the States?
in 1864 Co. H. 1st South Reg. Ga. Inf.
6. How long did your husband serve in said Company and Regiment?
about 1 yr
7. When and where did your husband's Company and Regiment surrender and was discharged?
at Fort Sumter
8. Was your husband present at the time and place when his Company and Regiment surrendered?
Yes
9. If not with his command at surrender, state clearly and specifically where he was, when he left command, for what cause, and by what authority?

10. When and where did your husband die?
in Cherokee 1868
11. Which of the following grounds do you base your application for pension, viz: First—Age and Poverty; Second—Infirmary and Poverty, or Third—Blindness and Poverty?

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

Age and Poverty

13. What has been your occupation since your husband's death?
nothing
14. How much can you earn gross, by your own exertion or labor?
nothing
15. What property, real or personal, or income do you have or possess, and its gross value?
no property

16. What property, real or personal, did you possess at death of husband or he left you, and of the years 1905, 1906, 1907 and 1908, and what disposition, if any, by sale or gift have you made of the same?

had no property

17. In what counties did you reside in 1905, 1906, 1907 and 1908, and what property did you return for taxation?
in Cherokee

18. How have you been supported since death of husband, and especially for 1905, 1906, 1907 and 1908?
by my sons

19. How much did your support cost for each of those years, and how much did you contribute by your own labor or income?
nothing

20. What was your employment during 1905, 1906, 1907 and 1908—how much did you receive for each year?
had no employment

21. Have you a family? If so, who composes such family? Give their means of support? Have they any lands or other property?
no
22. Have you ever made application for pension before?
no
23. How many applications have you made for a pension, and under what class?
nothing

Sworn to and subscribed before me, this the _____ day of _____ 190_____

11/27 day of Sept 1908
of Cherokee County.

QUESTIONS FOR WITNESSES.

STATE OF GEORGIA,

Cherokee County.

I, J. S. Duncan & L. A. Ford of said State and County, having been present as a witness in support of the application of Mrs. Martha Edwards for a Pension under the Act of 1900, 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? J. S. Duncan & L. A. Ford
2. Are you acquainted with the applicant, Mrs. Martha Edwards?
- If so, how long have you known her? forty or fifty years
3. Where does she reside, and how long since when has she been a resident of this State? in Cherokee County
4. When and where was she born? in Ga.
5. Were you ever acquainted with her husband?
6. Where did she reside in 1861? in Cherokee
7. When and to whom was he married? W. A. Edwards
8. When and where was he born?
9. How long have you known him? ever since the war
10. When and where did in Cherokee enlist in the war between the States, and in what Company and Regiment did he enlist, and how do you know this? Co. A. Rush Regt.
11. Were you a member of the same Company and Regiment? yes
12. How long did he perform regular military duty? don't know
13. When and where was his Company and Regiment surrendered and discharged from service?
14. Were you with the Command when it surrendered?
15. Was W. A. Edwards the husband of applicant present? don't know
16. If not present, where was he?
17. When and where did he leave his Command?
- For what cause?
- By whose authority he left?
- How do you know all this? (State fully and clearly.)

18. When and where did W. A. Edwards die? in Cherokee Co. June 2, 1908
19. Where did he reside at his death and how long had he been a resident of Georgia at his death? nearby at his life
20. Do you of your own knowledge know that applicant is the lawful widow of W. A. Edwards known then as Martha and wife of W. A. Edwards?
21. Has she remained unmarried since her soldier husband's death, and is now his widow?
22. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge? no property
23. What property, effects or income did applicant possess in 1905, 1906, 1907 and 1908, and what disposition did she make of it? no property
24. Has applicant conveyed any property in last two years or given any away, if so, what was it, and to whom? no

25. What is applicant's physical condition and her chances and ability to earn a support? not able to do any thing

26. Is applicant able to earn a support at labor of any sort, if not, why? no
27. How was she supported for 1905, 1906, 1907 and 1908? by husband's pension
28. How much did applicant contribute to her support for last two years? nothing
29. Give a full and complete statement of applicant's physical condition? she is old has Rheumatism Heart failure
30. What interest have you in the recovery of this pension by the applicant? none

Sworn to and subscribed before me this 29 day of Aug 1908 by W. A. Edwards Ordinary, J. S. Duncan & L. A. Ford Witnesses.

AFFIDAVITS OF PHYSICIANS.

STATE OF GEORGIA,

Cherokee County.

Personally before me comes J. M. Bates M.D. and W. W. Williams M.D. both known to me to be reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully Mrs. Martha Edwards, applicant for a pension under Act of 1900, and after such personal examination say that her physical condition is this applicant is suffering with Rheumatism Feet and legs swollen, unable to walk, unable to support herself and we have no interest in said pension if allowed.

Sworn to and subscribed before me this 29 day of Aug 1908 by J. M. Bates M.D. & W. W. Williams M.D. Ordinary, J. S. Duncan & L. A. Ford Witnesses.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cherokee County.

I, W. J. Webb Ordinary, in and for said County, hereby certify that the applicant, Mrs. Martha Edwards resides in said County, and has been a bona fide resident of this State since the 29 day of Aug 1908, and that the witnesses, Mr. J. S. Duncan & L. A. Ford are of trustworthy character, and that their statements are entitled to full faith and credit. I do further certify that before answering the foregoing questions, the applicant and said witnesses took the oath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses before the same was signed and subscribed. I further certify that the tax digest of Cherokee County shows that applicant returned for taxation in her own name in 1905 \$0.00 dollars worth of property, and in 1906 \$0.00 dollars worth of property, in 1907 \$0.00 dollars worth of property, and in 1908 \$0.00 dollars worth of property. Witness my hand and official seal this 29 day of Aug 1908 [SEAL.] W. J. Webb Ordinary, Cherokee County.

- NOTES—1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth; so help you God."
2. Additional affidavits may be attached, if blank spaces are insufficient.
3. All affidavits must be made before Ordinary.
4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since the 9th of April, 1865, not entitled.
5. Witnesses and two Physicians are necessary to make out claims.
6. Attach certified copy of marriage license in every case, or show why it cannot be obtained.

and to whom? -----

25. What is applicant's physical condition and her chances and ability to earn a support?

not able to do any thing

- NOTES—1. Before any questions are answered, the Ordinary, shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth; so help you God."
2. Additional affidavits may be attached, if blank spaces are insufficient.
3. All affidavits must be made before Ordinary.
4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since the 8th of April, 1865, not entitled.
5. Witnesses and two Physicians are necessary to make out claims.
6. Attach certified copy of marriage license in every case, or show why it cannot be obtained.

Edwards, W. A.
Cherokee Co.

No. 1907

INDIGENT PENSION.

~~1906~~

1907

Name W. A. Edwards

County Cherokee

Co. A. Rank Legion Regt.

Approved 190

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Franklin Printing and Publishing Co., Geo. W. Harrison, Mgr.,
Atlanta, Georgia.

9/20/06

STATE OF GEORGIA,

POWER OF ATTORNEY.

COUNTY.

I, _____ hereby authorize

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

at _____ day of _____ 190

Witness my hand and seal, this _____ day of _____ 190

Executed in presence of _____

[L. S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

of

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

at

by

Witness my hand and seal, this

day of

190

[L. S.]

Executed in presence of

No. on 1907

INDIGENT PENSION.

1906
1907

Name W. A. Edwards
County Cherokee
Co. A. Russell Legion Regt.

Approved _____ 190

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Printable printing and publishing Co. Geo. W. Davidson, Jr., Atlanta, Georgia.

9/20/06

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

COUNTY.

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

1. What is your name and where do you reside? (Give State, County and Postoffice.)
W. A. Edwards Victoria Cherokee Co. Georgia
2. How long and since when have you been a resident of this State? All my life
3. When and where were you born? Lumpkin Co. Ga in 1836
4. When and where and in what company and regiment did you enlist or serve? About the first of September 1864. in Company G, Co. A, Russell Legion State Troops
5. How long did you remain in such company and regiment? Seven Months
6. When and where was your company and regiment surrendered and discharged? I think it was about the last of April 1865 at Rome Ga
7. Were you present with your company and regiment when it was surrendered? I was not
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? I was sent home just a few days before the surrender on sick leave
9. How much can you earn (gross) per annum by your own exertions or labor? Nothing
10. What has been your occupation since 1865? Farming
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? Blindness & Poverty
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? Lost one eye in 1891 totally deaf & cannot see but very little out of the other eye not enough to work
13. What property, real and personal, or income, do you possess, and its gross value? I have no property
14. What property, real or personal, did you possess in 1901, 1902, 1903, 1904 and 1905, and what disposition, if any, by sale or gift, have you made of same? none
15. In what County did you reside during those years, and what property did you then return for taxation? I resided in Cherokee County I have no property
16. How were you supported during the years 1901, 1902, 1903, 1904 and 1905? by my children and they are all poor
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? I don't know I have not contributed anything
18. What was your employment during 1901, 1902, 1903, 1904 and 1905? What pay did you receive in each year? had no employment
19. Have you a family? If so, who composes such family? Give their means of support. Have they a home, or other property? Their ages and how employed? Just myself and wife
20. Are you receiving any pension? If so, what amount and for what disability? No
21. Have you ever made an application for pension before? Yes
22. How many applications have you ever made and under what class? I think I have made four all on the same class
Sworn to and subscribed before me this the
21 day of August 1906
W. A. Edwards Applicant.
W. J. Webb Ordinary.
of Cherokee County.

Every Question MUST Be Answered.

K O O D A K S A F

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Barlow COUNTY.

J. L. Edwards of said State and County, having been presented as a witness in support of the application of W. A. Edwards 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? J. L. Edwards
I live near Leesville Barlow Co. Ga.
2. Are you acquainted with W. A. Edwards, the applicant: if so how long have you known him? Have known him all my life
3. Where does he reside, and how long and since when has he been a resident of this State? In Cherokee Co. Ga. ever since I have known him.
4. When, where and in what company and regiment did he enlist, and how do you know? Sept. 1864, In Cherokee Co. Ga. Co. "A" Buckle's Legion
5. Were you a member of the same company and regiment? Yes
6. How long did he perform regular military duty? Out of duty months
7. When and where was his command surrendered? Jan. April 1865
This company was disbanded at Rome Ga.
8. Were you present when it surrendered? was disbanded? yes
9. Was applicant present? No
10. If he was not present, where was he? He was quit home before
When did he leave his command? About 10 days before his
By what company was he disbanded? disbanded How do you know all of this?
I was there present and know all
about by sight
11. What property, effects or income has the applicant? (Give your means of knowledge.) None
12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904 and 1905, and what disposition, if any, did he make of same? None of all
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? He has not. Had gone to disburse
14. What is the applicant's occupation and physical condition? Has no occupation. He quite weakly, not able to work and almost blind
15. Is the applicant unable to support himself by labor of any sort; if so, why? He is, because he is totally unable to work and nearly blind, very nervous and infirm
16. How was he supported during the years 1901, 1902, 1903, 1904 and 1905? By his children
17. What portion of his support for these four years was derived from his own labor or income? He has not earned more than for his support
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code. He is old, infirm, about blind. Can scarcely get about
19. Who composes family? What property have they? Children's ages and their earning capacity? Himself and wife have no property or income. Has no children under 18 in his children
20. What interest have you in the recovery of a pension by this applicant? None
Sworn to and subscribed before me, this the 7th day of Aug. 1906
J. L. Edwards Ordinary.
J. L. Edwards Witness.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Cherokee COUNTY.

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

Applicant has lost the use of one eye and is also afflicted in the other. Applicant is very feeble and not able to work. Can hardly see to get about

and that we have no interest in said pension being allowed. John M. Turk M.D.

Sworn to and subscribed before me, this the 21st day of August 1906
M. J. Meek Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Cherokee COUNTY.

I, M. J. Meek Ordinary, in and for said County, hereby certify that the applicant, W. A. Edwards resides in said County, and has been a bona fide resident of this State since the all day of life 189 and that the witnesses, viz.: J. M. & J. P. Turk

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 Cherokee County shows that applicant returned for taxation in his name in 1901 no return Dollars of property, and in 1902 Dollars of property; in 1903 Dollars of property; in 1904 Dollars of property; in 1905 Dollars of property.

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

Witness my hand and seal of office, this 11th day of Sept. 1906
M. J. Meek Ordinary.
Cherokee County.

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY.

I, N. A. Edwards, hereby authorize

N. J. Webb of Canton

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

me at Canton

by _____

WITNESS my hand and seal, this 9th day of Jan, 1907.

N. A. Edwards [L. S.]
mark

Executed in presence of

J. M. Blackwell

Edwards, N. A.
Cherokee Co.

Once Enrolled 1904.
(FOR THOSE ALREADY ENROLLED)

No. 7493

INDIGENT
SOLDIER'S PENSION
1907.

Name N. A. Edwards
County Cherokee
Co. A Regiment First Legion

WARRANT ISSUED

AUG 20 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

0

Geo. W. HARRIS, STATE PRINTER, ATLANTA.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Cherokee County.

Personally appears W. A. Edwards of Cherokee 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 Sept. 1886; that he is 70 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 8 months in Company A, of th Regiment of Rank Legion, State Troops, that his physical condition is as follows: Infirmity and poverty.

that his property consists of the following items: nothing

of the value of _____ Dollars. I am now earning by my labor, 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 1907. I have heretofore, as a resident of Cherokee County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the 9 day of Jan. 1907. W. A. Edwards ^{his} _{mark}
W. J. Webb Ordinary.

State of Georgia,

Cherokee County.

I, W. J. Webb Ordinary of said County, do certify that I am well acquainted with W. A. Edwards 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 9th day of Jan. 1907.



W. J. Webb Ordinary Cherokee County.

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

GEORGIA, Cherokee County.

I, W. J. Mott, Ordinary of said county, do certify that I personally know Martha Edwards, the applicant, and that she is the lawful widow of W. A. Edwards, and was on the Indigent Pension Roll of said Cherokee county, and was paid a Pension from Cherokee county for 1908, and at the time of his death on the 2 day of June, 1908, there was due to him and unpaid his Pension of Thirty dollars from the State of Georgia, and I know J. S. Shuman, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 1st day of July, 1908.
W. J. Mott Ordinary.
Cherokee County.

Edwards, W. A.
Cherokee Co.

No. _____

1908

**Application for Pension
Due Deceased Soldier**

UNDER ACT 1891.

BY

Mrs. Martha Edwards

Widow of W. A. Edwards

of Cherokee County.

Co. A, Regt. 1st Vol.

Approved and Paid

190

J. W. LINDSEY,

Commissioner of Pensions.

GEORGIA, _____ County.

I hereby authorize and constitute _____ of said county, my lawful attorney to collect and receipt for me in my name the Pension due me for 190____, through my deceased husband _____, who was on _____

Pension Roll and paid from _____ for 190____.

Witness my hand this _____ day of _____, 190____.

Attested before me:

}

Application for Pension Due Deceased Soldier

UNDER ACT APPROVED OCTOBER 9, 1891.

STATE OF GEORGIA, Cherokee County.

Personally before me comes Mrs. Martha Edwards, of said county, after being duly sworn, on oath says that she is the widow of W. A. Edwards who was duly enrolled as a Indigent Pensioner from the county of Cherokee and was paid a Pension of Sixty Dollars from Cherokee county for 1907, and that the said W. A. Edwards died in Cherokee county on the 2nd day of June 1908, and at the time of his death a Pension of Thirty Dollars was due him from Cherokee county and unpaid for 1908. Applicant further swears that she married the said

W. A. Edwards on the _____ day of _____ 1896, in Cherokee county and State of Georgia and resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks that the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this 1st day of July 1908.

W. J. Webb Ordinary, } Martha Edwards [L. S.]
Cherokee County. }

AFFIDAVIT OF WITNESS.

GEORGIA, Cherokee County.

Personally before me comes J. S. Duncan, who on oath says that he knew W. A. Edwards while in life and that he knows Mrs. Martha Edwards the above applicant; that he knows that the said W. A. Edwards and Martha Edwards were in due form of law married in the county of Cherokee in the State of Georgia on the _____ day of _____ 1896, and that they resided together as husband and wife from date of marriage to the day of his death on the 2 day of June 1908, and I now know that she is his dependent widow.

Sworn to and subscribed before me this 1 day of July 1908.

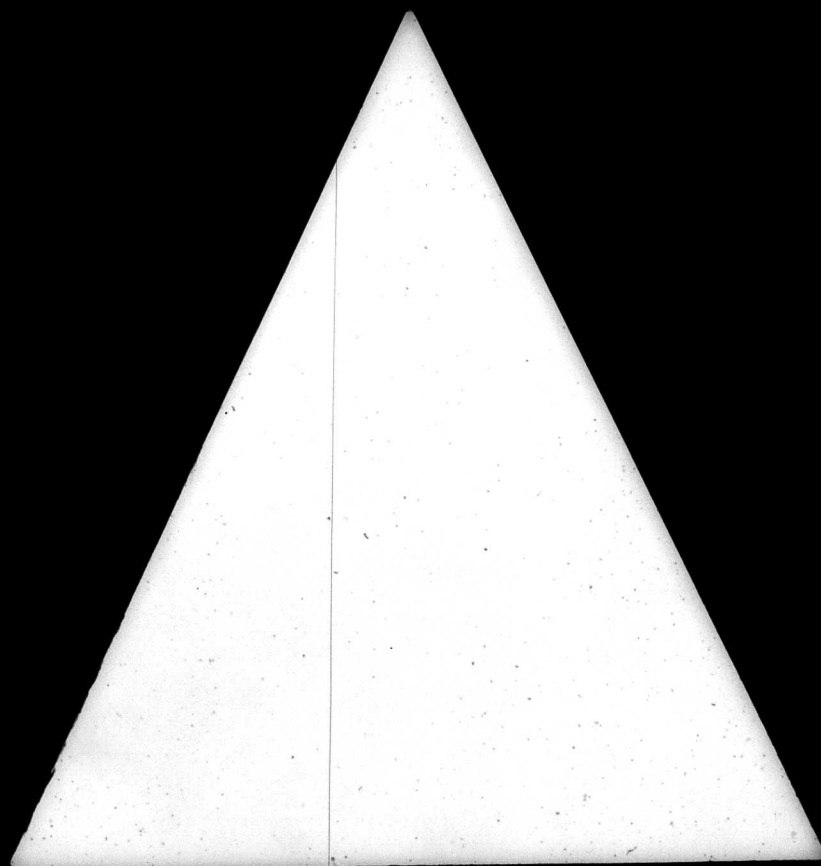
W. J. Webb Ordinary, } J. S. Duncan
Cherokee County. }

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

Sworn to and subscribed before me this 1 day of July 1901.
W. J. Webb Ordinary, } G. S. Duncan
Cherokee County. }

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

Georgia, Bartow County.
J. W. Hendricks, Ordinary of said
County, hereby Certify that J. T. Edwards
of said County is a man of trustworthy
character, and his statements are worthy
of belief, and that he was duly sworn
according to law, before he answered
the questions as set forth in the
Application of W. A. Edwards for a
License.
Witness my hand and seal of Office
Aug-27/1906
J. W. Hendricks Ordinary



Ellensburg, N.D.
Cherokee Co.
Wm. G. D. D. D.
OK 1913

D

No.

**Confederate
Soldier's Application.**

✓ UNDER ACT 1910.

County

Cherokee

Name

W. G. Ellensburg

Company

A. 20. S. 6. Reg.

Regiment

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

10/26/1912

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA.

Cherokee County, N. G. Blount of said State and County, hereby applies for the pension provided by Act of 1910, to Confederate Soldiers, and submits his sworn statement, with his testimony to make out the same, and after being duly sworn true answers to make to the questions propounded, answers as follows, to wit:

1. What is your name and where do you reside? (Give County and Post office)
N. G. Blount Ball Ground Ga
2. How long and since when have you been a continuous resident citizen of this State?
About thirty years 30 years
3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865?
I did
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service)
November 1862 56th Reg 20th Reg
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge)
About 3 1/2 years
6. When and where was your Company and Regiment surrendered or discharged from the Service?
May 5, 1865 at Columbus Ga
7. Were you actually present with your Command when it was surrendered or discharged?
Yes
8. If you were not actually present, state specifically and clearly where you were.
was present
- a. Where was your Command when you left it?
Surrendered
- b. When did you leave the Command?
did not leave
- c. For what cause did you leave?
did not leave
- d. By whose authority did you leave?
" "
- e. For how long was your leave granted? In what way?
" "
- f. Why did you not return to your Command after leave expired?
- g. In what way were you prevented?
- h. What effort did you make to return?
- i. Were you captured during the war?
No
- j. If so, when, and where? In what prison were you held and when were you released?
9. What property of every description was owned, in the use, possession and control of yourself and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value)
nothing except one note open 50.00
1 Color 1000 4.00
None with
10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov. 1908. To whom and for what price?
Sold one & one
11. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemized list)
one house 1000
one house 1000
about 2000
12. What annual or monthly income or earnings of yourself and wife and the source derived have you?
nothing except interest on 1000.00
13. Are you drawing a pension of any amount from this State or the United States?
14. Have you ever applied for the Georgia Pension and had it refused? and for what cause, it was not allowed?
No

Sworn to and subscribed before me, this the

14 day of Sept 1912
of Cherokee County.

**Confederate
Soldier's Application.**

UNDER ACT 1910.

County Cherokee
Name N. G. Blount
Company A. 20. 56. Reg
Regiment
Approved
J. W. LINDSEY,
Commissioner of Pensions

CHAS. F. BYRD, State Printer, Atlanta.

10/26/1912

Blount, N. G.
Cherokee Co
10/26/1912

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF Georgia
Decatur County.

N. T. Hayes of said State and County is hereby presented as a witness in support of the application of N. G. Ellentberg for the pension provided by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded, answers as follows:

1. What is your name and where do you reside? N. T. Hayes, Seneca South Carolina, Route one
2. How long and since when have you known N. G. Ellentberg the applicant? Since the latter part of 1862 until the fall of 1911.
3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? Cherokee County, Ga since 1911. He has letters from him.
4. When, where and in what Company and Regiment did N. G. Ellentberg enlist during war from 1861 to 1865? (Give date and place) Co. "G" #20th South Carolina Regt.
5. How did you obtain your information of this Service? Was in same Regt. & Company with him.
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) About 5 1/2 years.
7. When and where was his Command surrendered or discharged (give date and place) May 5th, 1865. Greensboro, N. C.
8. Were you personally present at the Surrender? yes.
9. If not, where were you and how came you there?
10. Was the applicant personally present with his Command at surrender? yes.
11. If not where was he and how came him there?

12. When did he leave his Command? Where was his Command when he left it? for what cause did he leave? By whose authority did he leave? and how long was he granted leave? How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) Known my own knowledge. Was present
13. In what way was he prevented from returning to his Command? How do you know?
14. What effort did he make to return to his Command and how do you know?
15. Was applicant captured as a prisoner? No If so, when and where? In what prison was he held? and when released?

Sworn to and subscribed before me, this the 1 day of Oct 1912 } N. T. Hayes
N. T. Smith Ordinary,
Judge of Probate Decatur County GA

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF Georgia
Cherokee County.

Personally before me comes J. B. Lyon & L. L. Spence who on oath says that they are freeholders residing in said County and we know N. G. Ellentberg the applicant for pension and we know the property that is now in the use, possession and control of himself and wife and of its cash value to wit: (Make List by items and value.) One Mule and Wagon worth \$60.00. Household worth \$25.00. Cash \$400.00

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov 1908? (State it fully by items.) Nothing within our knowledge
2. When and to whom was it sold or given to?
3. What was the price paid or stated to be paid?
4. What relation is the party to applicant? No Relation
5. What disposition was made of the proceeds of the sale?
6. Was the disposition of this property made in good faith and full value?

or was it made to obtain a pension?

Sworn to and subscribed before me, this the 16th day of Oct 1912

N. J. Malt Ordinary,
of Cherokee County.

ORDINARY'S CERTIFICATE.

STATE OF Georgia
Decatur County.

I, N. T. Smith Ordinary of said County, certify that I know the applicant N. G. Ellentberg for Pension is the person he represents himself to be and resides in said County. That I also know N. T. Hayes the witness swearing to the service and N. G. Ellentberg who are freeholders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Returns of shows that and wife value for tax is in 1908 \$ for 1909 \$ for 1910 \$

Sworn under my hand and official seal of office this 1 day of Oct 1912

N. T. Smith Ordinary,
Judge of Probate Decatur County.

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

QUESTIONS FOR WITNESS AS TO SERVICE

STATE OF Georgia
DeKalb County.

H. T. Hayes of said State and County is hereby presented as a witness in support of the application of R. G. Slicking for the pension provided by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded, answers as follows:

1. What is your name and where do you reside? H. T. Hayes Since South Carolina, Route one
2. How long and since when have you known R. G. Slicking the applicant? Since the latter part of 1862 & until the fall of 1911.
3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? Columbus County, Ga. since 1911. I have had letters from him.
4. When, where and in what Company and Regiment did R. G. Slicking enlist during war from 1861 to 1865? (Give date and place). Co. G. 20th South Carolina Regt.
5. How did you obtain your information of this Service? He is in same Regt. & Company with him.
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date). About 5 1/2 years.
7. When and where was his Command surrendered or discharged (give date and place). May 5, 1865. Greensboro, N. C.
8. Were you personally present at the Surrender? yes.
9. If not, where were you and how came you there?
10. Was the applicant personally present with his Command at surrender? yes.
11. If not where was he and how came him there?
12. When did he leave his Command? _____ Where was his Command when he left it? _____ for what cause did he leave? _____ By whose authority did he leave? _____ and how long was he granted leave? _____ How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically). As a very close personal knowledge. Was present.
13. In what way was he prevented from returning to his Command? _____ How do you know? _____
14. What effort did he make to return to his Command and how do you know? _____
15. Was applicant captured as a prisoner? No. If so, when and where? _____ In what prison was he held? _____ and when released? _____

Sworn to and subscribed before me, this the 1st day of Oct 1912.
D. J. Hayes
 Ordinary,
Judge of Probate, DeKalb County, Ga.

AFFIDAVIT OF TWO FREEHOLDERS

STATE OF Georgia
Charles County.

Personally before me come J. B. Ryan & L. L. Hines who on oath says that they are freeholders residing in said County and we know R. G. Slicking the applicant for pension and we know the property that is now in the use, possession and control of himself and wife and of its cash value to wit: (Make List by items and value.) One Maple and Wagon worth \$25.00 & Household contents \$25.00 Cashes \$40.00

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov 1908? (State is fully by items). Nothing within our knowledge.
2. When and to whom was it sold or given to? _____
3. What was the price paid or stated to be paid? _____
4. What relation is the party to applicant? No Relation
5. What disposition was made of the proceeds of the sale? _____
6. Was the disposition of this property made in good faith and full value? _____ or was it made to obtain a pension? _____

Sworn to and subscribed before me, this the 16th day of Oct 1912.
H. J. Mott Ordinary,
Charles County.

ORDINARY'S CERTIFICATE

STATE OF Georgia
DeKalb County.

I, D. J. Hayes Ordinary of said County, certify that I know the applicant R. G. Slicking for pension in the person he represents himself to be and reside in said County. That I also know H. T. Hayes the witness swearing to the service and J. B. Ryan & L. L. Hines who are freeholders, that they are residents of said County and were duly sworn by me before signing the foregoing affidavit and that they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Receipts of _____ shows that _____ and wife value for tax is in 1908 \$ _____ for 1909 \$ _____ for 1910 \$ _____

Swore under my hand and official seal of office this 1 day of Oct 1912.
D. J. Hayes Ordinary,
Judge of Probate, DeKalb County, Ga.

NOTES: 1. Before any questions are answered the Ordinary shall read applicants and all witnesses in the following words: "You do solemnly swear that you will true answers make to each question asked you and the evidence you shall give shall be the whole truth or you are dead?" 2. Additional affidavits may be received if sent upon the application. 3. All affidavits must be made before the Ordinary and subscribed by him. 4. If applicant has no property at all in the possession, use or control of him and wife, affidavit of freeholders unnecessary.

Sworn to and subscribed before me, this the

6 day of Oct 1912

S. D. Smith

Ordinary

Judge of Probate, Oconee County, Ga.

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

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cherokee County

I, N. J. Smith, Ordinary of said County, certify that I know

the applicant, N. J. Ellensburg, for Pension is the person he represents himself to be and resides in said County. That I also know

the witness swearing to the service and J. B. Lyon and L. L. Spence who are freeholders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the

Tax Returns of N. J. Ellensburg shows that he and wife made no Return for 1908 \$ for 1909 \$ for 1910 \$

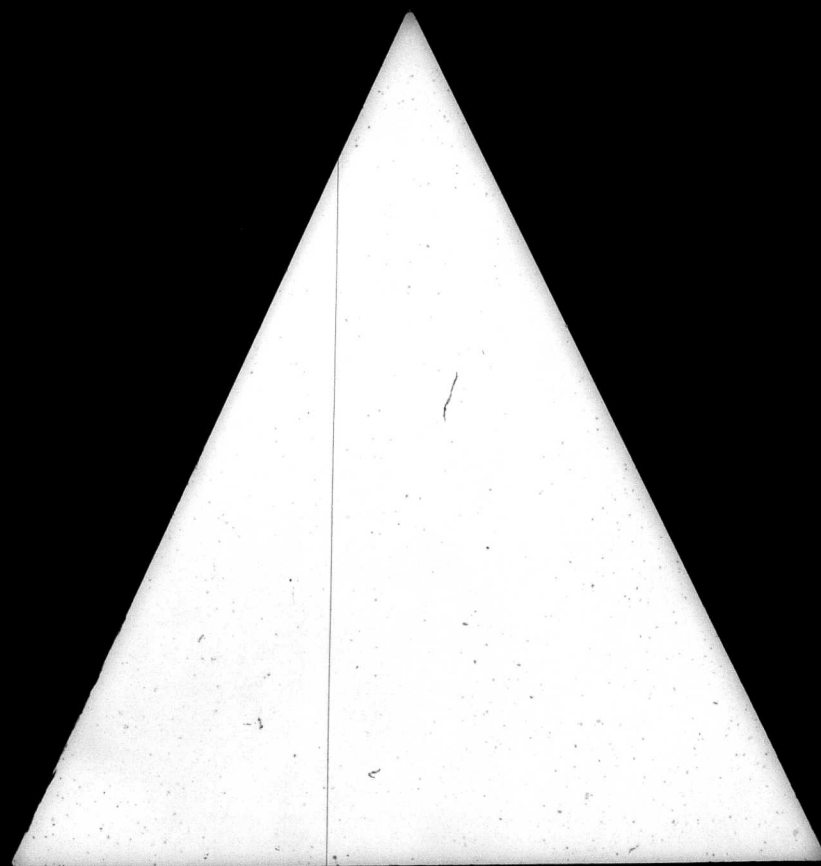
Sworn under my hand and official seal of office this 23 day of Oct 1912

N. J. Smith

Ordinary

of Cherokee County.

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



POWER OF ATTORNEY.

STATE OF GEORGIA.

County. }

County evidence

To receive and receive for the person named and require that he make same to

Witness my hand and seal, this

day of

190

[L. S.]

Executed in presence of

Ellington, F. J.
Cherokee
No. 1404
INDIGENT PENSION.

1908

Name F. J. Ellington

County Cherokee

Co. 1st Co. Regt.

Approved 190

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

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

9/29/08

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize

_____ of _____

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

at _____ by _____

Witness my hand and seal, this _____ day of _____ 190 _____

[L. S.]

Executed in presence of _____

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

County, }

I, F. J. Ellington of said State and County, desiring to avail myself of the Pension Act (Section 1984, Code), hereby submit his proofs, and after being duly sworn true answers to make to the following questions, depose and answer as follows:

1. What is your name and where do you reside? (Give Name, County and Postoffice.) F. J. Ellington, Orange, Cherokee County, Ga.

2. How long and since when have you been a resident of this State? Since 1844

3. When and where were you born? Born July 26 - 1844, in Wilkes Co.

4. When and where and in what company and regiment did you enlist or serve? July, 1863, in Company H, 1st Ga. Reg. of State Troops

5. How long did you remain in such company and regiment? Fifteen months

6. When and where was your company and regiment surrendered and discharged? I don't know

7. Were you present with your company and regiment when it was surrendered? No

8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? on March 1864, I was given a final discharge while camped at Cartersville, Ga.

9. How much can you earn (gross) per annum by your own exertions or labor? Very little

10. What has been your occupation since 1865? Farming & stock raising

11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"? Upon second

12. If upon the first ground, state how long you have been in such condition that you could not earn your support. If upon the second, give a full and complete history of the infirmity and its extent. (If upon the third, state whether you are totally blind and when and where you lost your sight. I am getting old and nervous have suffered from Rheumatism since the war, cannot on and during my service in the army.

13. What property, real and personal, or income, do you possess, and its gross value? Own all amount of personal property

14. What property, real or personal, did you possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, by sale or gift, have you made of same? about same as now disposed of now.

15. In what County did you reside during those years, and what property did you then return for taxation? Cherokee in 1866, Sumner, 1867-2-3-4-5-6-7-8-9-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-100-101-102-103-104-105-106-107-108-109-110-111-112-113-114-115-116-117-118-119-120-121-122-123-124-125-126-127-128-129-130-131-132-133-134-135-136-137-138-139-140-141-142-143-144-145-146-147-148-149-150-151-152-153-154-155-156-157-158-159-160-161-162-163-164-165-166-167-168-169-170-171-172-173-174-175-176-177-178-179-180-181-182-183-184-185-186-187-188-189-190-191-192-193-194-195-196-197-198-199-200-201-202-203-204-205-206-207-208-209-210-211-212-213-214-215-216-217-218-219-220-221-222-223-224-225-226-227-228-229-230-231-232-233-234-235-236-237-238-239-240-241-242-243-244-245-246-247-248-249-250-251-252-253-254-255-256-257-258-259-260-261-262-263-264-265-266-267-268-269-270-271-272-273-274-275-276-277-278-279-280-281-282-283-284-285-286-287-288-289-290-291-292-293-294-295-296-297-298-299-300-301-302-303-304-305-306-307-308-309-310-311-312-313-314-315-316-317-318-319-320-321-322-323-324-325-326-327-328-329-330-331-332-333-334-335-336-337-338-339-340-341-342-343-344-345-346-347-348-349-350-351-352-353-354-355-356-357-358-359-360-361-362-363-364-365-366-367-368-369-370-371-372-373-374-375-376-377-378-379-380-381-382-383-384-385-386-387-388-389-390-391-392-393-394-395-396-397-398-399-400-401-402-403-404-405-406-407-408-409-410-411-412-413-414-415-416-417-418-419-420-421-422-423-424-425-426-427-428-429-430-431-432-433-434-435-436-437-438-439-440-441-442-443-444-445-446-447-448-449-450-451-452-453-454-455-456-457-458-459-460-461-462-463-464-465-466-467-468-469-470-471-472-473-474-475-476-477-478-479-480-481-482-483-484-485-486-487-488-489-490-491-492-493-494-495-496-497-498-499-500-501-502-503-504-505-506-507-508-509-510-511-512-513-514-515-516-517-518-519-520-521-522-523-524-525-526-527-528-529-530-531-532-533-534-535-536-537-538-539-540-541-542-543-544-545-546-547-548-549-550-551-552-553-554-555-556-557-558-559-560-561-562-563-564-565-566-567-568-569-570-571-572-573-574-575-576-577-578-579-580-581-582-583-584-585-586-587-588-589-590-591-592-593-594-595-596-597-598-599-600-601-602-603-604-605-606-607-608-609-610-611-612-613-614-615-616-617-618-619-620-621-622-623-624-625-626-627-628-629-630-631-632-633-634-635-636-637-638-639-640-641-642-643-644-645-646-647-648-649-650-651-652-653-654-655-656-657-658-659-660-661-662-663-664-665-666-667-668-669-670-671-672-673-674-675-676-677-678-679-680-681-682-683-684-685-686-687-688-689-690-691-692-693-694-695-696-697-698-699-700-701-702-703-704-705-706-707-708-709-710-711-712-713-714-715-716-717-718-719-720-721-722-723-724-725-726-727-728-729-730-731-732-733-734-735-736-737-738-739-740-741-742-743-744-745-746-747-748-749-750-751-752-753-754-755-756-757-758-759-760-761-762-763-764-765-766-767-768-769-770-771-772-773-774-775-776-777-778-779-780-781-782-783-784-785-786-787-788-789-790-791-792-793-794-795-796-797-798-799-800-801-802-803-804-805-806-807-808-809-810-811-812-813-814-815-816-817-818-819-820-821-822-823-824-825-826-827-828-829-830-831-832-833-834-835-836-837-838-839-840-841-842-843-844-845-846-847-848-849-850-851-852-853-854-855-856-857-858-859-860-861-862-863-864-865-866-867-868-869-870-871-872-873-874-875-876-877-878-879-880-881-882-883-884-885-886-887-888-889-890-891-892-893-894-895-896-897-898-899-900-901-902-903-904-905-906-907-908-909-910-911-912-913-914-915-916-917-918-919-920-921-922-923-924-925-926-927-928-929-930-931-932-933-934-935-936-937-938-939-940-941-942-943-944-945-946-947-948-949-950-951-952-953-954-955-956-957-958-959-960-961-962-963-964-965-966-967-968-969-970-971-972-973-974-975-976-977-978-979-980-981-982-983-984-985-986-987-988-989-990-991-992-993-994-995-996-997-998-999-1000-1001-1002-1003-1004-1005-1006-1007-1008-1009-1010-1011-1012-1013-1014-1015-1016-1017-1018-1019-1020-1021-1022-1023-1024-1025-1026-1027-1028-1029-1030-1031-1032-1033-1034-1035-1036-1037-1038-1039-1040-1041-1042-1043-1044-1045-1046-1047-1048-1049-1050-1051-1052-1053-1054-1055-1056-1057-1058-1059-1060-1061-1062-1063-1064-1065-1066-1067-1068-1069-1070-1071-1072-1073-1074-1075-1076-1077-1078-1079-1080-1081-1082-1083-1084-1085-1086-1087-1088-1089-1090-1091-1092-1093-1094-1095-1096-1097-1098-1099-1100-1101-1102-1103-1104-1105-1106-1107-1108-1109-1110-1111-1112-1113-1114-1115-1116-1117-1118-1119-1120-1121-1122-1123-1124-1125-1126-1127-1128-1129-1130-1131-1132-1133-1134-1135-1136-1137-1138-1139-1140-1141-1142-1143-1144-1145-1146-1147-1148-1149-1150-1151-1152-1153-1154-1155-1156-1157-1158-1159-1160-1161-1162-1163-1164-1165-1166-1167-1168-1169-1170-1171-1172-1173-1174-1175-1176-1177-1178-1179-1180-1181-1182-1183-1184-1185-1186-1187-1188-1189-1190-1191-1192-1193-1194-1195-1196-1197-1198-1199-1200-1201-1202-1203-1204-1205-1206-1207-1208-1209-1210-1211-1212-1213-1214-1215-1216-1217-1218-1219-1220-1221-1222-1223-1224-1225-1226-1227-1228-1229-1230-1231-1232-1233-1234-1235-1236-1237-1238-1239-1240-1241-1242-1243-1244-1245-1246-1247-1248-1249-1250-1251-1252-1253-1254-1255-1256-1257-1258-1259-1260-1261-1262-1263-1264-1265-1266-1267-1268-1269-1270-1271-1272-1273-1274-1275-1276-1277-1278-1279-1280-1281-1282-1283-1284-1285-1286-1287-1288-1289-1290-1291-1292-1293-1294-1295-1296-1297-1298-1299-1300-1301-1302-1303-1304-1305-1306-1307-1308-1309-1310-1311-1312-1313-1314-1315-1316-1317-1318-1319-1320-1321-1322-1323-1324-1325-1326-1327-1328-1329-1330-1331-1332-1333-1334-1335-1336-1337-1338-1339-1340-1341-1342-1343-1344-1345-1346-1347-1348-1349-1350-1351-1352-1353-1354-1355-1356-1357-1358-1359-1360-1361-1362-1363-1364-1365-1366-1367-1368-1369-1370-1371-1372-1373-1374-1375-1376-1377-1378-1379-1380-1381-1382-1383-1384-1385-1386-1387-1388-1389-1390-1391-1392-1393-1394-1395-1396-1397-1398-1399-1400-1401-1402-1403-1404-1405-1406-1407-1408-1409-1410-1411-1412-1413-1414-1415-1416-1417-1418-1419-1420-1421-1422-1423-1424-1425-1426-1427-1428-1429-1430-1431-1432-1433-1434-1435-1436-1437-1438-1439-1440-1441-1442-1443-1444-1445-1446-1447-1448-1449-1450-1451-1452-1453-1454-1455-1456-1457-1458-1459-1460-1461-1462-1463-1464-1465-1466-1467-1468-1469-1470-1471-1472-1473-1474-1475-1476-1477-1478-1479-1480-1481-1482-1483-1484-1485-1486-1487-1488-1489-1490-1491-1492-1493-1494-1495-1496-1497-1498-1499-1500-1501-1502-1503-1504-1505-1506-1507-1508-1509-1510-1511-1512-1513-1514-1515-1516-1517-1518-1519-1520-1521-1522-1523-1524-1525-1526-1527-1528-1529-1530-1531-1532-1533-1534-1535-1536-1537-1538-1539-1540-1541-1542-1543-1544-1545-1546-1547-1548-1549-1550-1551-1552-1553-1554-1555-1556-1557-1558-1559-1560-1561-1562-1563-1564-1565-1566-1567-1568-1569-1570-1571-1572-1573-1574-1575-1576-1577-1578-1579-1580-1581-1582-1583-1584-1585-1586-1587-1588-1589-1590-1591-1592-1593-1594-1595-1596-1597-1598-1599-1600-1601-1602-1603-1604-1605-1606-1607-1608-1609-1610-1611-1612-1613-1614-1615-1616-1617-1618-1619-1620-1621-1622-1623-1624-1625-1626-1627-1628-1629-1630-1631-1632-1633-1634-1635-1636-1637-1638-1639-1640-1641-1642-1643-1644-1645-1646-1647-1648-1649-1650-1651-1652-1653-1654-1655-1656-1657-1658-1659-1660-1661-1662-1663-1664-1665-1666-1667-1668-1669-1670-1671-1672-1673-1674-1675-1676-1677-1678-1679-1680-1681-1682-1683-1684-1685-1686-1687-1688-1689-1690-1691-1692-1693-1694-1695-1696-1697-1698-1699-1700-1701-1702-1703-1704-1705-1706-1707-1708-1709-1710-1711-1712-1713-1714-1715-1716-1717-1718-1719-1720-1721-1722-1723-1724-1725-1726-1727-1728-1729-1730-1731-1732-1733-1734-1735-1736-1737-1738-1739-1740-1741-1742-1743-1744-1745-1746-1747-1748-1749-1750-1751-1752-1753-1754-1755-1756-1757-1758-1759-1760-1761-1762-1763-1764-1765-1766-1767-1768-1769-1770-1771-1772-1773-1774-1775-1776-1777-1778-1779-1780-1781-1782-1783-1784-1785-1786-1787-1788-1789-1790-1791-1792-1793-1794-1795-1796-1797-1798-1799-1800-1801-1802-1803-1804-1805-1806-1807-1808-1809-1810-1811-1812-1813-1814-1815-1816-1817-1818-1819-1820-1821-1822-1823-1824-1825-1826-1827-1828-1829-1830-1831-1832-1833-1834-1835-1836-1837-1838-1839-1840-1841-1842-1843-1844-1845-1846-1847-1848-1849-1850-1851-1852-1853-1854-1855-1856-1857-1858-1859-1860-1861-1862-1863-1864-1865-1866-1867-1868-1869-1870-1871-1872-1873-1874-1875-1876-1877-1878-1879-1880-1881-1882-1883-1884-1885-1886-1887-1888-1889-1890-1891-1892-1893-1894-1895-1896-1897-1898-1899-1900-1901-1902-1903-1904-1905-1906-1907-1908-1909-1910-1911-1912-1913-1914-1915-1916-1917-1918-1919-1920-1921-1922-1923-1924-1925-1926-1927-1928-1929-1930-1931-1932-1933-1934-1935-1936-1937-1938-1939-1940-1941-1942-1943-1944-1945-1946-1947-1948-1949-1950-1951-1952-1953-1954-1955-1956-1957-1958-1959-1960-1961-1962-1963-1964-1965-1966-1967-1968-1969-1970-1971-1972-1973-1974-1975-1976-1977-1978-1979-1980-1981-1982-1983-1984-1985-1986-1987-1988-1989-1990-1991-1992-1993-1994-1995-1996-1997-1998-1999-2000-2001-2002-2003-2004-2005-2006-2007-2008-2009-2010-2011-2012-2013-2014-2015-2016-2017-2018-2019-2020-2021-2022-2023-2024-2025-2026-2027-2028-2029-2030-2031-2032-2033-2034-2035-2036-2037-2038-2039-2040-2041-2042-2043-2044-2045-2046-2047-2048-2049-2050-2051-2052-2053-2054-2055-2056-2057-2058-2059-2060-2061-2062-2063-2064-2065-2066-2067-2068-2069-2070-2071-2072-2073-2074-2075-2076-2077-2078-2079-2080-2081-2082-2083-2084-2085-2086-2087-2088-2089-2090-2091-2092-2093-2094-2095-2096-2097-2098-2099-2100-2101-2102-2103-2104-2105-2106-2107-2108-2109-2110-2111-2112-2113-2114-2115-2116-2117-2118-2119-2120-2121-2122-2123-2124-2125-2126-2127-2128-2129-2130-2131-2132-2133-2134-2135-2136-2137-2138-2139-2140-2141-2142-2143-2144-2145-2146-2147-2148-2149-2150-2151-2152-2153-2154-2155-2156-2157-2158-2159-2160-2161-2162-2163-2164-2165-2166-2167-2168-2169-2170-2171-2172-2173-2174-2175-2176-2177-2178-2179-2180-2181-2182-2183-2184-2185-2186-2187-2188-2189-2190-2191-2192-2193-2194-2195-2196-2197-2198-2199-2200-2201-2202-2203-2204-2205-2206-2207-2208-2209-2210-2211-2212-2213-2214-2215-2216-2217-2218-2219-2220-2221-2222-2223-2224-2225-2226-2227-2228-2229-2230-2231-2232-2233-2234-2235-2236-2237-2238-2239-2240-2241-2242-2243-2244-2245-2246-2247-2248-2249-2250-2251-2252-2253-2254-2255-2256-2257-2258-2259-2260-2261-2262-2263-2264-2265-2266-2267-2268-2269-2270-2271-2272-2273-2274-2275-2276-2277-2278-2279-2280-2281-2282-2283-2284-2285-2286-2287-2288-2289-2290-2291-2292-2293-2294-2295-2296-2297-2298-2299-2300-2301-2302-2303-2304-2305-2306-2307-2308-2309-2310-2311-2312-2313-2314-2315-2316-2317-2318-2319-2320-2321-2322-2323-2324-2325-2326-2327-2328-2329-2330-23

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Gwin COUNTY.

Wm Ellington of said State and County, having been presented as a witness in support of the application of J. J. Ellington 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? Wm Ellington Chatham Co Ga
2. Are you acquainted with J. J. Ellington, the applicant; if so, how long have you known him? all his life he was
3. Where does he reside, and how long and since when has he been a resident of this State? at Union Hill Church Ga. all his life
4. When, where and in what company and regiment did he enlist, and how do you know? Feb. 1862. at Eliza Ga. Co. H. 1st Va Reg State Troops
5. Were you a member of the same company and regiment? yes
6. How long did he perform regular military duty? about 13 months
7. When and where was his command surrendered? I don't know
8. Were you present when it surrendered? No
9. Was applicant present? No
10. If he was not present, where was he? He was at home discharged by the doctor
When did he leave the command? in Feb 1864 For what cause? Disability
By what authority he left? by authority of the doctor How do you know all of this? I was with him in the service
11. What property, effects or income has the applicant? (Give your means of knowledge.) None. I am intimate with him
12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, did he make of same? None
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? No
14. What is the applicant's occupation and physical condition? Is old and feeble and disabled. Pains a little when able
15. Is the applicant unable to support himself by labor of any sort; if so, why? He is unable to labor and support himself. because of age and infirmity
16. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? By wife he and his children could make on ordinary farm
17. What portion of his support for these four years was derived from his own labor or income? Very little
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code. Has general nerve & skeletal weakness in middle & lower
19. Who composes family? What property have they? Children's ages and their earning capacity? 5 children Chatham none from 11 to 21 yrs of age
20. What interest have you in the recovery of a pension by this applicant? None whatever

Sworn to and subscribed before me, this the

26 day of Sept 1908
T. H. Baker Ordinary.

Wm Ellington
Witness.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Scherkee COUNTY.

Personally seen before me Wm Willingham and J. M. Bates, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully J. J. Ellington, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

Has general nerve weakness and Right
paralytic nerve in right leg
him totally unable to do manual
labor.

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

Sworn to and subscribed before me, this the 26 day of Sept 1908
Wm Willingham M.D.
J. M. Bates M.D.
Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Gwin COUNTY.

I, T. H. Baker Ordinary, in and for said County, hereby certify that the applicant J. J. Ellington resides in said County, and has been a bona fide resident of this State since the day of 1844 and that the witnesses, viz: Wm Ellington

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 herein prescribed, and that the full text of the affidavit was read to the applicant and witness before same was signed.

I further certify that the tax digest of Scherkee County shows that applicant returned for taxation in his name in 1901 \$46.00 Dollars of property, and in 1902 \$46.00 Dollars of property; in 1903 \$46.00 Dollars of property; in 1904 \$46.00 Dollars of property; in 1905 \$46.00 Dollars of property; in 1906 \$46.00 Dollars of property; in 1907 \$46.00 Dollars of property.

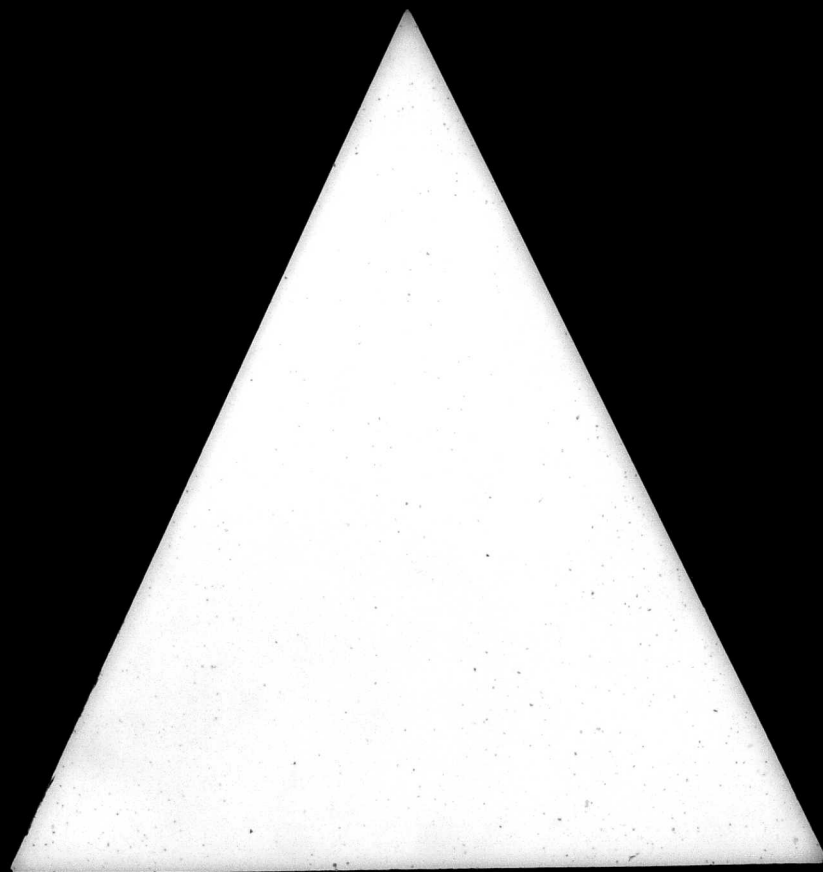
In my opinion the foregoing claim is made in good faith.

Witness my hand and seal of office, this 26 day of Sept 1908
T. H. Baker Ordinary.
Gwin County.

I, 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 answers you shall give will be the whole truth, so help you God."
And every time the Ordinary must certify to the character of the witness, and as to the execution of the proof as above set out.

20. What interest have you in the recovery of a pension by this applicant? None whatever
Sworn to and subscribed before me, this the } 26 day of Sept 1908 }
W. H. Dalton Ordinary. W. H. Dalton Witness.

24 15 1908.
1. Before any questions are answered, the Ordinary shall swear solemnly and the witnesses in the following words: "We shall true answers make to each of the questions asked of you, and the answers you shall give will be the whole truth, so help you God."
2. If the Ordinary believes any he attended if blank spaces are insufficient.
3. In every case the Ordinary must certify to the character of the witness, and as to the execution of the paper as there set out.



June 13, 1861 -
Present, Jan'y. 30, 1865.

Oct 19 1922
Ellis, Mollie
No. *Cherokee*

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County *Cherokee*
Name *Mollie Ellis*
Widow of *W M Ellis*
Company *F*
Regiment *1811 9th Inf*
Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-29-1919

Ordinary's Certificate

STATE OF GEORGIA,
Cherokee COUNTY.

I, *A M Seagrave* Ordinary of said County, do certify
that I know *Mrs Mollie Ellis* the applicant for pension. She
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 November 1908; that I also know _____
the witness who swears to the service of husband; that both of them are now residents of said County and
were duly sworn by me before signing the foregoing affidavits and that they both are truthful, trust-
worthy, and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this *15* day of *Oct* 19*12*
(SEAL) *A M Seagrave* Ordinary,
Cherokee County.

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

Ordinary's Certificate

STATE OF GEORGIA,

COUNTY.

I, J. M. Sallagard Ordinary of said County, do certify that I know Mrs. Mollie Ellis the applicant for pension. She 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 November 1908; that I also know the witness who swears to the service of husband; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they both are truthful, trustworthy, and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 15th day of Oct 1912.

(SEAL)

Ordinary,

Cherokee County.

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

Widow's Pension

Under Act 1910—as Amended by Act of 1912.

County Cherokee
Name Mollie Ellis
Widow of Wm M Ellis
Company F
Regiment 18th Reg Inf
Approved

J. W. LINDSEY,

Commissioner of Pensions.

By the Printing Co. under Federal Award.

10-29-1919

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

Questions for Applicant

STATE OF GEORGIA,

COUNTY.

Personally before me comes Mrs. Mollie Ellis of said State and County, and, after being duly sworn, says that she desires to apply for a pension allowed under the Act of 1910, as amended by Act of 1919, and submit testimony to make out the same, true answers makes to the following questions to-wit:

- What is your name, and where do you reside? Mollie Ellis, Barton Ga.
- How long and since when have you been a continuing resident of the State of Georgia? 53 years since 1859 =
- When, where and to whom were you married? Jan. 6th 1866 =
None, Floyd Co. Ga. = Wm M. Ellis
 - Have you married since the death of first and soldier husband? No
- 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.) Reg. Heavy Ar. 6th Co. 1861 = 18th Georgia Reg.
- When and where did the commands of your husband surrender or discharge from the army? Spring, 1865 = 1st Cavalry Reg.
- Was your husband personally present at the time of the surrender or discharge of this command? No.
- If he was not present state clearly where he was? No.
- Where was his command when he left?
 - For what cause did he leave his command?
 - By whose authority did he leave his command?
 - For how long was he granted leave of absence?
 - What was his physical condition when he left his command?
 - What effort did he make to return to his command?
 - In what way was he prevented from going back to Command
 - Was he captured by the enemy at any time?
 - If so, when and where captured and where held as a prisoner, and when and for what cause released?
- When and where did your first husband die? Sept. 12th 1912. Barton Ga.
- Were you residing together when he died? No.
- If not, how long had you resided apart?
- Are you now a widow? No.
- Have you or your husband heretofore been paid a pension by the State? No.

Sworn to and subscribed before me this the

16th day of Oct 1912

J. M. Sallagard Ordinary
of Cherokee County.

(SEAL)

Application for Testimony by a Widow Under Act of 1919
As Amended by Act of 1919

Questions for Applicant

Questions for Witnesses as to Service of Husband and Marriage

STATE OF GEORGIA,

Fulton COUNTY

Personally before me comes Geo. M. Chamber 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? Geo. M. Chamber
130 E. St. Atlanta, Ga.

2. How long and since when have you known Mr. Willie Ellis applicant?
Since 1870

3. How long and since when has she continuously resided in this State? (Give date.)
Since 1870

4. When and to whom was she married? W. M. Ellis How do you know? was living
as man and wife since 1861

5. How long and since when did you know W. M. Ellis her husband?
Since 1861 until his death in 1912

6. When and where did W. M. Ellis the husband of applicant, die?
1912 Sept. 2. Carter Ga.

7. Were the applicant and her husband living together as husband and wife at the date of his death?
Yes

8. If not, how long did they live apart before his death?

Were they divorced? No

9. When, where and in what Company and Regiment did W. M. Ellis enlist?
June 11 1861 at Bay Shore, Co. 3 1861

10. Were you a member of the same Company?

11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? Since he reported until July 1863

12. When and where did his Command surrender, and was discharged?
Approximately April 1865

13. Were you personally present when it was surrendered? No If not, where were you at home and how came you there? made up by furnishing substitute

14. Was the husband of applicant personally present at surrender? Thomas L. Ellis If not where was he? When, where and for what

cause did he leave Command? (Give date.) By whose

authority did he leave his Command? And how

long was he granted leave? How do you know all this?
Since a member of Phillips Legion in 1861 discharged

15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command? repaired 16th Reg. and furnished a sub. then July 1863

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

Sworn to and subscribed before me this the

29 day of Oct 1912

Charles C. Mason Ordinary

of Fulton County.

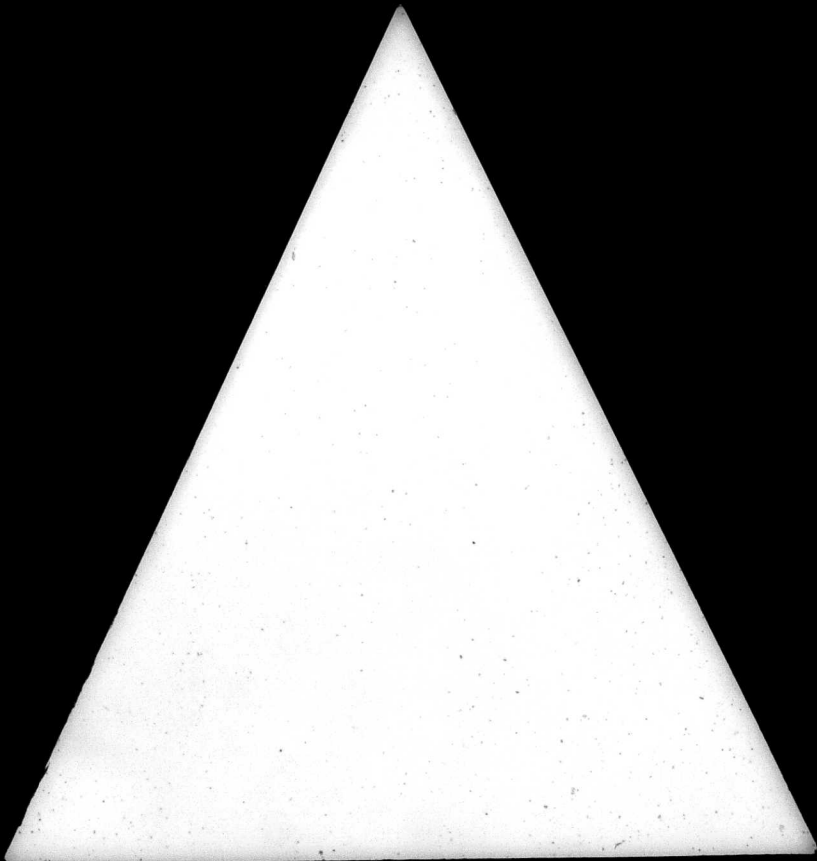
(SEAL)

George W. Shomlee
I certify that Geo. M. Chamber is a resident of Fulton Co. Ga. and was duly sworn by me before making the above affidavit and he is true to the facts of his statement is exhibited to full faith and credit.
Charles C. Mason

of (Seal)
County
J. E. E.

Edward O. Mearns Ordinary
of *Fulton* County
(SEAL)

is a Sheriff of Fulton Co. Ga.
and was duly sworn by me
before making the above affidavit
and he is trustworthy and
his statement is entitled to full
faith and credit
Edward O. Mearns



K O D A K S A F E T Y A F I L M

POWER OF ATTORNEY.

STATE OF GEORGIA.

Know all Men by these Presents, That I, Charles W. Elrod County, Cherokee
of the State of Georgia do hereby appoint Mary Elrod of Cherokee County, in said State, do hereby appoint

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 7th day of April, 1891.

Executed in the presence of us: Mary J. Elrod [L.S.]

P. P. Elrod

DIRECTIONS.

If allowed, send amount by James J. Elrod to me at Walesen and oblige,



Elrod Mary
Cherokee County
803 1891.

No. 3/4

Widows' Pension

PAID TO

Mrs. Mary Elrod
 OF
Cherokee COUNTY.

\$100.00.

Warrant Issued

1891

AND HANDED TO

POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA.

Cherokee County.

Know all Men by these Presents, That I,

Charles of *Mary Elrod* the Widow of *David Elrod*

County, in said State, do hereby appoint

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *7th* day of *April* 1891

Executed in the presence of us:

O. W. Patterson
P. P. Sullivan

DIRECTIONS.

If allowed, send amount by *James J. Elrod* to me at *Walden Ga*, and oblige,



Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA.

County of *Cherokee*

In person came before me, the undersigned Ordinary

in and for the County of *Cherokee*

Mrs. *Mary Elrod*, who being sworn according to law, says under

oath that she is the widow of *David Elrod*, who was a soldier in

the service of the Confederate States, and served as a member of Company *D*, of the

23d Regiment of *Georgia* Volunteers; that he enlisted in said

service on or about the *31st* day of *August* 1861, and was in the

Virginia Army up to *March* 1862. That while in the

Army, he was on the *1st* day of *February* 1862. (See Note No. 1)

He died in March 1862 with

Pneumonia coming in *from*

and died at Beeghly Mills on York

River in the State of Virginia County

Mills North West of York Town

He contracted the disease in the Army

and died while in actual service at

the time and place above specified

Deponent further swears that she was the wife of said deceased soldier during his term of service in the Army, and that she has never married since his death; that she became his wife on the *27th* day of *August* 1859, and that she has resided in Georgia continuously since the *18th* day of *February* 1862, that Georgia is her home, and was such on the 23d day of December, 1890, and since said date she has not lived in any other State or locality. Deponent, as the widow of said deceased soldier husband, applies for the pension provided by Act of the General Assembly of Georgia, approved December 23d, 1890, for the pension year ending February 15th, 1892, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this, the

7 day of *April* 1891.

O. W. Patterson

Ordinary.

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

Widow's Pension

PAID TO

Mrs. Mary Elrod

of

Cherokee County.

\$100.00.

Warrant Issued

AND HANDED TO

1891

Elrod Mary
Cherokee County
873 1891.
No. 3/12

Affidavit for Three Witnesses.

Form No. 2.

STATE OF GEORGIA,

County of Cherokee } In person came before me, the undersigned Ordinary
 & Benjamin C. Fuller } in and for said County, witnesses James
 and Joacab C. Pugh (each known to said Attesting Officer as truthful,
 reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge
 Mrs. Mary Elrod, of the County of Cherokee,
 State of Georgia, is the widow of David Elrod, who was a soldier in
 Company 3 of the 23d Regiment of Vol Volunteers.
 That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or
 about the 31 day of August 1861. That while in said service, or by
 reason of said service in the Army, he lost his life as follows: He contracted
a disease known as Rheumatic pains
resulting in fever and died at Rogers
Mills on York River in the State of Virginia
wherein he was killed by the Rebels of York River
He contracted the disease of which
he died while in Federal service
at the hospital and the surgeon in
charge notified the Captain of his
and our company of his death

We further swear that Mrs. Mary Elrod was the wife of said
 soldier during the service, and that she has not intermarried since his death, and that she resides in
Cherokee County of the State of Georgia.

Sworn to and subscribed before me, this, the
7th day of April 1891.

O. M. Putnam

Ordinary.

James E. Harrison
Benjamin C. Fuller
A. C. Pugh

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

Form No. 3.

STATE OF GEORGIA,

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

In Witness Whereof, I have hereto set my hand and affixed the seal of my office, this, the
7th day of April 1891.

{ SEAL }

O. M. Putnam

Ordinary.

Form No. 4.

NOTES.

The pension is only payable to certain classes of widows.

Those whose husbands were killed in service.

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

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

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

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

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

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

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

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

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

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

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

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

By order of the Governor.

W. H. HARRISON,
 Sec. Ex. Department.

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

Form No. 2.

STATE OF GEORGIA, County of Cherokee
I, Allen B. Borm Ordinary in and for said County of
Cherokee State of Georgia, hereby certify that I am acquainted with Mrs.
Mary Elrod the applicant for a pension in this case, and
know, from my own knowledge, (or from positive proof presented to me by reputable witnesses),
that she resides in this County, and that she resided in the State of Georgia on December 23,
1890, and has not lived out of the State since that date. That she is the widow of
David Elrod deceased, and as such has heretofore been allowed a
pension for the year ending February 15th 1892.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the
28th day of January 1893.

Allen B. Borm Ordinary.

POWER OF ATTORNEY.

Form No. 3.

STATE OF GEORGIA, Cherokee County.
KNOW ALL MEN BY THESE PRESENTS, That I, Mary Elrod
of Nalasca Cherokee County
County, in said State, do hereby appoint William H. Harrison of the City
of Atlanta Ga my true and lawful attorney in fact, for
me and in my name, to receive and receipt for whatever amount of money I may be entitled to
from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affi-
davit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be
issued by the Governor, or for any sum of money which may be coming to me for the reason
aforesaid.

In Witness Whereof, I have hereunto set my hand and seal, this 30th
day of January 1893.

Executed in the presence of us:

A. B. Borm Mary Elrod [L. S.]
Allen B. Borm Mary Elrod

DIRECTIONS.

Send amount by Bank check or draft to
me at Nalasca Cherokee County Ga. and oblige
Mary Elrod

Widow's Pension,
for year ending February 15th, 1893.
— PAID TO —
Mary Elrod
— OF —
Cherokee COUNTY.
Warrant, issued
2/10
1893
AND HANDLED TO
A. B. Borm
Geo. W. Ferguson, State Printer, Atlanta.

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

Form No. 2.

STATE OF GEORGIA, County of Cherokee
I, A. B. Borm Ordinary in and for said County of
Cherokee State of Georgia, hereby certify that I am acquainted with Mrs.
Mary Elrod the applicant for a pension in this case, and
know, from my own knowledge (or from positive proof presented to me by reputable wit-
nesses), that she resides in this County, and that she resided in the State of Georgia on
December 23, 1890, and has not lived out of the State since that date. That she is the
widow of David Elrod deceased, and as such has heretofore
been allowed a pension for the year ending February 15th, 1893.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office,
this, the 19th day of January 1894.

A. B. Borm Ordinary.

POWER OF ATTORNEY.

Form No. 3.

STATE OF GEORGIA, Cherokee County.
KNOW ALL MEN BY THESE PRESENTS, That I, Mary Elrod
of Cherokee
County in said State, do hereby appoint W. H. Harrison
of Atlanta Ga my true and lawful attorney in fact, for
me, and in my name, to receive and receipt for whatever amount of money I may be en-
titled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the
foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any
Warrant that may be issued by the Governor, or for any sum of money which may be
coming to me for the reason aforesaid.

In Witness Whereof, I have hereunto set my hand and seal, this 19th
day of January 1894.

Executed in the presence of us:

A. B. Borm Mary Elrod [L. S.]
A. B. Borm Mary Elrod

DIRECTIONS.

Send amount by check to A. B. Borm to
me at Atlanta Ga. and oblige
Mary Elrod

Widow's Pension,
for year ending February 15th, 1894.
— PAID TO —
Mary Elrod
— OF —
Cherokee COUNTY.
Warrant, issued
2/10
1894
AND HANDLED TO
A. B. Borm
Geo. W. Ferguson, State Printer, Atlanta.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of *Cherokee*

Personally comes Mrs.

Mary Elwood

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

Cherokee

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

continuously ever since *1856* That she is the Widow of*Daniel Elwood*

who was a Soldier in Company

I of the *15th* Regiment of *Georgia Infantry*

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

1861 and served in the Army up to *1862* That he lost hislife on the _____ day of _____ *1862* (State herefull particulars of the husband's death, when, where and from what cause.) (*found her**dead in a hospital for sick soldiers at*
Fort Sumter in the State of South Carolina. She was informed
that he died with Rheumatism, and learned that her late
husband never returned to his home after the war.

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year *1842*; that Georgia is her home and she resided in this State *23d* day of December, *1890*, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1892, and now apply for the allowance provided by law for the year ending February 15th, 1893.

Sworn to and subscribed before me, this

20th day of *January* *1893*.*Allen C. Lane* Ordinary.

Post-office

Waleska, Ga.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of *Cherokee*

Personally comes Mrs.

Mary Elwood

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

Cherokee

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

continuously ever since *the year* *1837* That she is the Widow of*Daniel Elwood*

who was a Soldier in Company

I of the *11th* Regiment of *Georgia*Volunteers, that he enlisted in said Regiment on or about the month of *September**1861* and served in the Army up to *1862* That he lost hislife on the _____ day of _____ *18* (State herefull particulars of the husband's death, when, where and from what cause.) (*found her**dead in a hospital for sick soldiers at*
Fort Sumter in the State of South Carolina. She was informed
that he died with Rheumatism, and learned that her late
husband never returned to his home after the war.

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year *1840*; that Georgia is her home and she resided in this State *23d* day of December, *1890*, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1893, and now apply for the allowance provided by law for the year ending February 15th, 1894.

Sworn to and subscribed before me, this

19th day of *January* *1894*.*Allen C. Lane* Ordinary.

Post-office

Waleska, Ga.

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

Form No. 2.

STATE OF GEORGIA, County of Cherokee

I, D. L. Brown Ordinary in and for said County of Cherokee State of Georgia, hereby certify that I am acquainted with Mrs. Mary E. Blood the applicant for a pension in this case, and know from my own knowledge (or from positive proof presented to me by reputable witnesses), that she resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the State since that date. That she is the widow of David E. Blood deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1894.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 11 day of January 1895.

D. L. Brown Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cherokee County.

KNOW ALL MEN BY THESE PRESENTS, That I, Mary E. Blood of Cherokee

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 11th day of January 1895.

Executed in the presence of us:

D. L. Brown, Ordinary
C. E. Jones

DIRECTIONS.

Send amount by _____ to _____ me at _____, and oblige _____

E. Blood, Mary
Cherokee Co.
FOR THOSE HERETOFORE PAID.
1895.
No. 2402
WIDOW'S PENSION.
for year ending February 15th, 1895.
PAID TO
Mary E. Blood
OF
Cherokee County.
Widow of David E. Blood
WARRANT ISSUED
Feb 4
1895.
AND HANDLED TO
city
Geo. W. Harrison, State Printer.

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

Form No. 2.

STATE OF GEORGIA, County of Cherokee

I, D. L. Brown Ordinary in and for said County of Cherokee State of Georgia, hereby certify that I am acquainted with Mrs. Mary E. Blood the applicant for a pension in this case, and know from my own knowledge (or from positive proof presented to me by reputable witnesses), that she resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the State since that date. That she is the widow of David E. Blood deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1895.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this the 6th day of January 1896.

D. L. Brown Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cherokee County.

I, Mary E. Blood hereby authorize Mr. D. H. Hight of Cherokee to receive and receipt for the pension paid hereon and request that he remit same to D. L. Brown residing at Canton Ga. & check

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 6 day of Jan'y 1896.

Executed in the presence of

D. L. Brown, Ordinary

E. Blood, Mary
Cherokee County
FOR THOSE HERETOFORE PAID.
1896.
No. 227
WIDOW'S PENSION.
for year ending February 15th, 1896.
PAID TO
Mary E. Blood
OF
Cherokee County.
Widow of David E. Blood
WARRANT ISSUED
24
1896.
AND HANDLED TO
Mr. C.
Geo. W. Harrison, State Printer.