

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

Form No. 1.

STATE OF GEORGIA, County of Cherokee

I, A. L. Lamm Ordinary in and for said County of Cherokee State of Georgia, hereby certify that I am acquainted with Mrs. Jane S. Witt 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 M. Witt 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 11th day of January 1895.

{SEAL}

A. L. Lamm Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, Cherokee County.

KNOW ALL MEN BY THESE PRESENTS, That I, Jane S. Witt of Cherokee

County in said State, do hereby appoint Richard Johnson Sec. 24 Capt. of Boysie 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.

Jane S. Witt [L. S.]

Executed in the presence of us:

A. L. Lamm Ordinary

DIRECTIONS.

Send amount by Book to A. L. Lamm Ordinary to me at Cartersburg, and oblige

Jane S. Witt

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

Form No. 2.

STATE OF GEORGIA, County of Cherokee

I, A. L. Lamm Ordinary in and for said County of Cherokee State of Georgia, hereby certify that I am acquainted with Mrs. Jane S. Witt 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 M. Witt 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.

{SEAL}

A. L. Lamm Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, Cherokee County.

I, Jane S. Witt hereby authorize Mr. A. Wright of Atlanta Ga to receive and receipt for the pension paid hereon and request that he remit same to A. L. Lamm only at Cartersburg Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this the 6th day of January 1896.

Executed in the presence of

A. L. Lamm Ordinary
of Cherokee County

WIDOW'S PENSION,

No. 235

1896.

PAID TO

Mrs. Jane S. Witt

OF

Cherokee County.

widow of David M. Witt

WARRANT ISSUED

21

1896.

AND HANDED TO

Atty

Geo. W. HARRISON, State Printer.

Witt, Jane S.
Cherokee Co.
FOR THOSE HERETOFORE PAID.

1895.

No. 2422

WIDOW'S PENSION,

for year ending February 15th, 1895.

PAID TO

Mrs. Jane S. Witt

OF

Cherokee County.

widow of David M. Witt

WARRANT ISSUED

7264

1895.

AND HANDED TO

Atty

Geo. W. HARRISON, State Printer.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY. }

I, Susan Henderson hereby authorize

Mr. L. Wright of Atlanta Ga

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

J. B. Harrison at Atlanta Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 18th

day of May 1904.

Susan Henderson [L. S.]

Executed in presence of

J. B. Harrison

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY. }

I, Susan Henderson hereby authorize

W. J. Webb of Cherokee County

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 12th

day of January 1904.

Susan Henderson [L. S.]

Executed in presence of

J. B. Harrison

Henderson, Susan
Cherokee County

TO THOSE HERETOFORE PAID.

1904.

No. 688

WIDOW'S PENSION

FOR YEAR ENDING DECEMBER 31, 1904

PAID TO

Mrs. Susan Henderson

or

Cherokee County,

Widow of Erwin Henderson

Co. F Regiment 25th Inf

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

FEB 18 7 1904,

AND HANDED TO

Webb

Geo. W. Harrison, State Printer, Atlanta.

Henderson, Susan
Cherokee County

TO THOSE HERETOFORE PAID.

1904.

No. 1990

WIDOW'S PENSION

FOR YEAR ENDING DECEMBER 31, 1904

PAID TO

Mrs. Susan Henderson

or

Cherokee County,

Widow of Erwin Henderson

Co. F Regiment 25th Inf

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

FEB 23 1 1904,

AND HANDED TO

Webb

Geo. W. Harrison, State Printer, Atlanta.

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Cherokee

PERSONALLY COMES MRS.

Susan Henderson

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 1830. That she is the Widow of Emeline Henderson who was a soldier in Company F of the 28th Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of August 1861, and served in the Army up to June 1862. That he lost his life on the 15th day of June 1862. (State here particulars of the husband's death, when, where and from what cause.)

Died in Hospital in Richmond, Va.

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 1852.

I have been paid a pension as a resident of Cherokee County for the year ending December 31, 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me,
this 18th day of May 1904.
E. C. Brown Ordinary.

Susan Henderson
Post Office.

State of Georgia,

Cherokee County.I, E. C. Brown

Ordinary of said County, certify that I am well

acquainted with Mrs. Susan Henderson, 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 1830.

Given under my official signature and seal, this the 18th day of May 1904.



E. C. Brown
Ordinary of Cherokee County

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

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Cherokee

PERSONALLY COMES MRS.

Susan Henderson

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 1830. That she is the Widow of Brown Henderson who was a soldier in Company F of the 28th Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of August 1861, and served in the Army up to June 1862. That he lost his life on the 15th day of June 1862. (State here particulars of the husband's death, when, where and from what cause.)

Died in Hospital in Richmond, Va. June 15th 1862 with chronic diarrhea

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 1852.

I have been paid a pension as a resident of Cherokee County for the year ending December 31, 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me,
this 12th day of Jan 1904.
W. J. Webb Ordinary.

Susan Henderson
Post Office.

State of Georgia,

Cherokee County.I, W. J. Webb

Ordinary of said County, certify that I am well

acquainted with Mrs. Susan Henderson, 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 1852.

Given under my official signature and seal, this the 12th day of January 1904.



W. J. Webb
Ordinary of Cherokee County

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY.

I, Susan Henderson, hereby authorize

W. J. Webb 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 3

day of Jan 1906.

Susan Henderson [L. S.]

Executed in presence of

F. M. Webb

Henderson, Susan
Cherokee County

To Those Heretofore Paid.

1906.

No. 1013

WIDOW'S PENSION

For year ending Dec. 31, 1906.

PAID TO

Mrs. Susan Henderson

OF

Cherokee County,

Widow of Carver Henderson

Co. F Regiment 28th Ia

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

FEB 1 1906,

AND HANDLED TO

The Pensioner's Name and Pension Office, U. S. W. Henderson, Ill.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY.

I, Susan Henderson, hereby authorize

W. J. Webb

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 11

day of Jan 1907.

Susan Henderson [L. S.]

Executed in presence of

F. M. Blackburn

Henderson, Susan
Cherokee County

To Those Heretofore Paid.

1907.

No. 1698

WIDOW'S PENSION

For year ending Dec. 31, 1907.

PAID TO

Mrs. Susan Henderson

OF

Cherokee County,

Widow of Carver Henderson

Co. F Regiment 28th Ia

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

FEB 13 1907,

AND HANDLED TO

The Pensioner's Name and Pension Office, U. S. W. Henderson, Ill.

STATE OF GEORGIA

For Widows Heretofore Allowed Pensions

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cherokee

PERSONALLY COMES MRS.

Susan Henderson

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 1830. That she is the Widow of Ervin Henderson who was a soldier in Company F of the 28th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of August 1861, and served in the Army up to June 1862. That he lost his life on the 16th day of June 1862. (State here particulars of the husband's death, when, where and from what cause.) died in Hospital in Richmond Va.

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 1852.

I have been paid a pension as a resident of Cherokee County, for the year ending December 31, 1905, and now apply for the pension provided by law for the year ending December 31, 1906.

Sworn to and subscribed before me
this 3rd day of Jan 1906.
W. J. Webb, Ordinary.

Susan Henderson
Post Office Canton

State of Georgia,

Cherokee County.I, W. J. Webb

Ordinary of said County, certify that I am well acquainted with Mrs. Susan Henderson, 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 1830.

Given under my official signature and seal, this the 3rd day of Jan 1906.

Official
Seal

Ordinary of Cherokee County.

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1906.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cherokee

PERSONALLY COMES MRS.

Susan Henderson

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 1830. That she is the Widow of Ervin Henderson who was a soldier in Company F of the 28th Regiment of Gen Volunteers, that he enlisted in said regiment on or about the month of August 1861, and served in the Army up to June 1862. That he lost his life on the 16th day of June 1862. (State here particulars of the husband's death, when, where and from what cause.) died in Hospital at Richmond Va.

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 1852.

I have been paid a pension as a resident of Cherokee County, for the year ending December 31, 1906, and now apply for the pension provided by law for the year ending December 31, 1907.

Sworn to and subscribed before me
this 11 day of Jan 1907.
W. J. Webb, Ordinary.

Susan Henderson
Post Office Canton Ga

State of Georgia,

Cherokee County.I, W. J. Webb

Ordinary of said County, certify that I am well acquainted with Mrs. Susan Henderson, 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 1830.

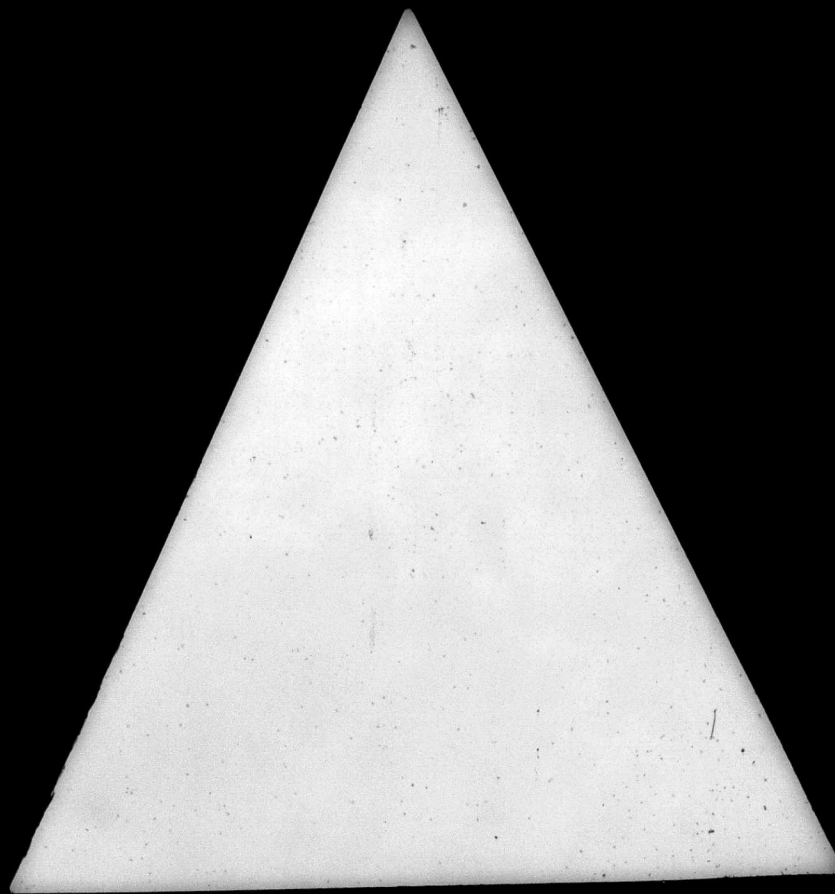
Given under my official signature and seal, this the 11 day of Jan 1907.

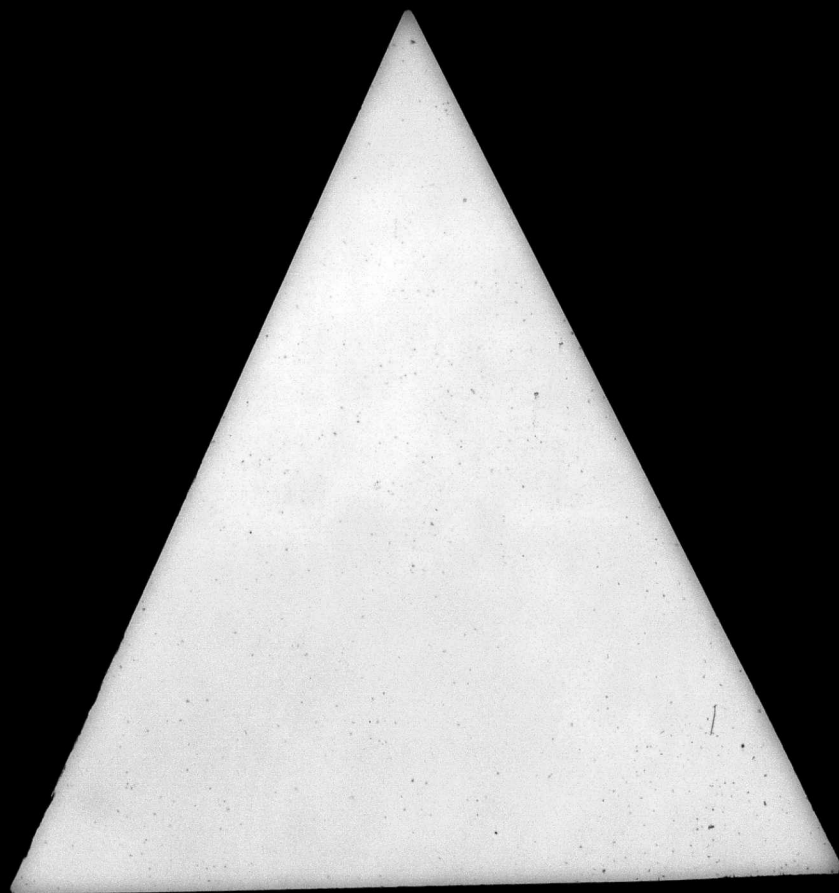
Official
Seal

Ordinary of Cherokee County.

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

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1906.





POWER OF ATTORNEY.
STATE OF GEORGIA.

Know all Men by these Presents, That I, Mary E. Hendrick County, Cherokee

of Hartford, P. O. Cherokee County, in said State, do hereby appoint Mrs. M. Hendrick 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 29 day of April 1891

Executed in the presence of us: Mary E. Hendrick [L. S.]

M. Hendrick
M. Hendrick

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

DICTIONS.



Received Mary E.
Cherokee County

1891.
To Forsyth Co 1892

No. 1793
Cherokee Co

Widows' Pension

PAID TO
Mrs. Mary E. Hendrick
OF
Cherokee COUNTY.

\$100.00.

Warrant Issued

1891
AND HANDED TO

POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA.

Schenck County.

Know all Men by these Presents, That I,

Mary E. Hendrix

of Hartford, P.O.

Schenck

County, in said State, do hereby appoint Philo Westbury; The W. Westbury of Hartford P.O. Schenck Co. 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

29 day of April 1891

Executed in the presence of:

Mary E. Hendrix

[L. S.]

J. C. Smith
O. W. Putnam ordinary

DIRECTIONS.

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



Widow's Pension

Mary E. Hendrix

Schenck COUNTY.

\$1000.00.

Warrant Issued

AND HANDED TO

1891

Geo. W. Harrison, State Printer Atlanta.

Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA.

County of Schenck

In person came before me, the undersigned Ordinary in and for the County of _____

Mrs. Mary E. Hendrix, who being sworn according to law, says under oath that she is the widow of Julius P. Hendrix, who was a soldier in the service of the Confederate States, and served as a member of Company A

Schenck Regiment of Cal Volunteers; that he enlisted in said service on or about the 15 day of September 1864, and was in the 10th Army up to 1864. That while in the Army, he was on the 10th day of October 1864. (See Note No. 1)

he was in the service as a soldier at Round Bay, and sent to his home in the early morning for his wife, Mrs. Hendrix, from which he died on the 30th day of October 1864.

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 16th day of September 1857, and that she has resided in Georgia continuously since the 16 day of September 1857; 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

29 day of April 1891.

O. W. Putnam

Ordinary.

Mary E. Hendrix

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.

Affidavit for Three Witnesses.

Form No. 2.

STATE OF GEORGIA,

County of Cherokee

In person came before me, the undersigned Ordinary
in and for said County, witnesses

and Thomas Thomas (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 E. Hendrix, of the County of Cherokee,
State of Georgia, is the widow of Garrett P. Hendrix, who was a soldier in
Company H of the Cherokee Legion Regiment of Inf Volunteers.
That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or
about the 15 day of September 1864. That while in said service, or by
reason of said service in the Army, he lost his life as follows: that while in said

Service at Rome Ga. he was in or about the day of
October 1864. Sick with Pneumonia Fever and sent off
as a sick soldier to his home in Cherokee County Ga.
at which place he died, his telephonic child met him
in his last sickness not after his death but one day before
that he died in or about the 30th day of October 1864.
One of children J. A. Wright saw him in his last
sickness and after he was dead.

We further swear that Mrs. Mary E. Hendrix 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

29 day of April 1891.

O. W. Putnam

Ordinary.

Thomas Thomas
J. A. Wright

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

Form No. 3.

STATE OF GEORGIA,

County of Cherokee

I, Oscar W. Putnam Ordinary

in and for said County of

State of Georgia, hereby certify that I am acquainted with Mrs. Mary E. Hendrix
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 and hear read the proofs they sign.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the

29th day of April 1891.

{ SEAL }

Oscar W. 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.

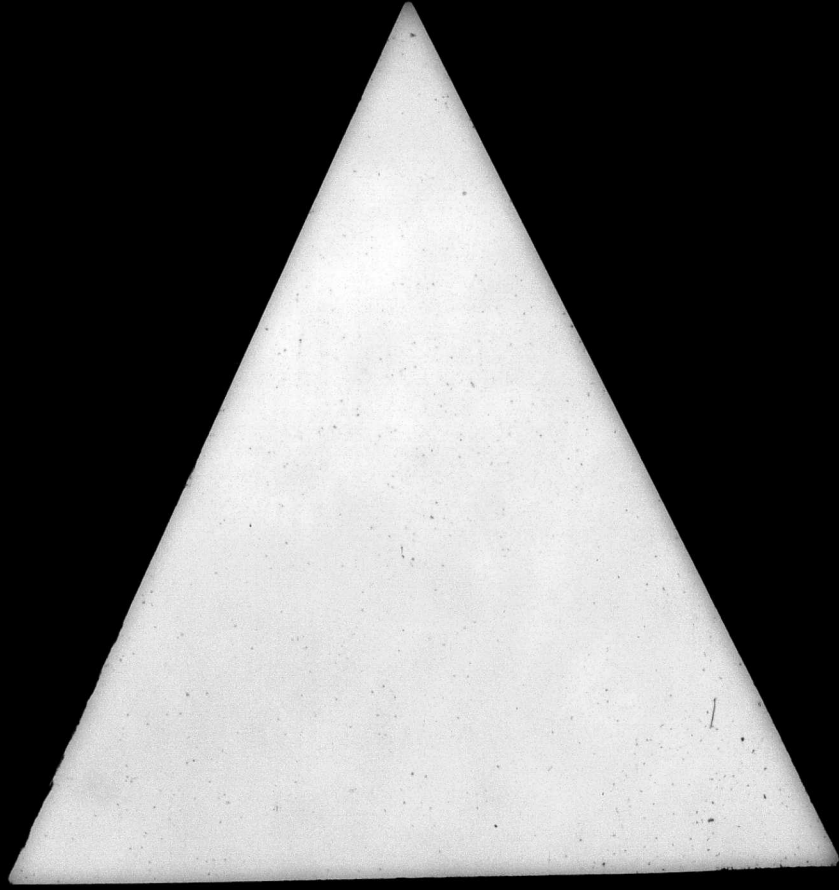
Fill out Power of Attorney authorizing some one who can call at Treasurer's office in Atlanta and
receive the money, to receipt for same.

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.



KODAK SAFETY FILM

Widow, Kettie V. Hannon
Cherokee County

1870 WIDOW'S APPLICATION

To Be Put on Roll in Her Own Right When
Husband Was on the Pension Roll
of Georgia.

County *Cherokee*
Name *Kettie V. Hannon*
Widow of *John A. Hannon*
Company *15*
Regiment *23d. Ia. Reg.*
Date of Husband's Death *Sept 27 1923*
Date of Marriage *Nov 11 1870*
Approved *C. E. McGREGOR*
Commissioner of Pensions

C. E. MCGREGOR,
Commissioner of Pensions.

10/30/1923

STATE OF GEORGIA.

Ordinary's Certificate

Cherokee COUNTY.

I *Jack Olney* Ordinary of said County, do certify that I
know Mrs. *Kettie V. Hannon* the applicant for pension; that she is the person
January 1st, 1920; that I also know the witness as to
marriage, and that both the foregoing were duly sworn by me before signing the respective affi-

and credit.
Given under my hand and official seal of office this *24* day of *Oct* 192*2*.

(SEAL OF ORDINARY)

Jack Olney Ordinary,
Cherokee County

Instructions

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be taken by the Ordinary, or by any Justices of the Peace, or by any Notary Public, or by any other officer authorized to administer oaths, before the Ordinary of the County of residence.
3. All affidavits must be made before the Ordinary of the County of residence.
4. Only widows who are married prior to first January, 1881, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—because Disabled Pensioners made no proof of service and were not required to do so.

Widow of John A. Hannon
Company 35
Regiment 23d. Ia. Reg.
Date of Husband's Death Sept. 27, 1923
Date of Marriage Nov. 15 1878
Approved C. E. McGregor
Commissioner of Pensions

C. E. MCGREGOR,
Commissioner of Pensions.

10/30/1923

Ordinary's Certificate

COUNTY.

Edley Ordinary of said County, do certify that I
Edley the applicant for pension; that she is the person
and that she is continuously a bona fide resident of said County since
I know _____ the witness as to
 foregoing were duly sworn by me before signing the respective affi-
thful and trustworthy and their statements are entitled to full faith

I official seal of office this 24 day of Oct . 1923

Ordinary,

County

Instructions.

sworn the Ordinary shall swear applicant and the witness in the following words:
I will true answers make to each of the questions asked you and the evidence
attached if blank spaces are insufficient.
before the Ordinary of the County of residence.
d prior to first January, 1881, are entitled
marriage license if obtainable. If not, prove marriage by some person, or by gen-
ers must use the Blue Application Blank and state and prove full term of hus-
sailed Pensioners made no proof of service and were not required to do so.

Hemson, Fannie V. E.
Cherokee County

WIDOW'S APPLICATION

To Be Put on Roll in Her Own Right When
Husband Was on the Pension Roll
of Georgia.

County *Cherokee*
Name *Fannie V. Hemson*
Widow of *John A. Hemson*
Company *B*
Regiment *23d Ga Reg*
Date of Husband's Death *Sept 29 1923*
Date of Marriage *Nov 11 1870*
Approved *C. E. McGee*
Commissioner of Pensions

C. E. McGEE, JR.
Commissioner of Pensions

10/30/1923

Ordinary's Certificate

STATE OF GEORGIA,

Cherokee COUNTY.

I, *Jacob Massey* Ordinary of said County, do certify that I
know Mrs. *Fannie E. Hemson*, the applicant for pension; that she is the person
she represents herself to be, and that she is continuously a bona fide resident of said County since
January 1st, 1920; that I also know _____, the witness as to
marriage, and that both the foregoing were duly sworn by me before signing the respective affi-
davits, and that they are truthful and trustworthy and their statements are entitled to full faith
and credit.

Given under my hand and official seal of office this *24* day of *Oct*, 192*2*.

(SEAL OF ORDINARY)

Jacob Massey Ordinary,
Cherokee County

Instructions.

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary of the County of residence.
4. Only widows who are married prior to first January, 1861, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—because Disabled Pensioners made no proof of service and were not required to do so.

MARRIAGE LICENSE

OF

AND

Issued _____ 192
and Recorded on Page _____ Book _____
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 copy of marriage of John A. Henson and Hettie V. Puckett 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 24th day of Oct. 1923.

Jacob Massey
Ordinary and ex-officio C.O.

APPLICATION FOR PENSION BY A WIDOW

Whose Deceased Husband Was on the Pension Roll of Georgia. (Not to be Used by the Widow of a Disabled Soldier Pensioner.)

STATE OF GEORGIA,

Cherokee COUNTY.

Personally before me comes *Hettie V. Henson* of said County, who, after having been duly sworn, says that she is the widow of *John A. Henson* to whom, in the County of *Cherokee* State of *Georgia* she was married on the *15* day of *Nov.* 18*71*, and that she remained his wife, and resided with him to the date of his death in *Sept 28* 19*23* and that she has not since his death remarried; at the time of his death he was a resident of *Cherokee* County, in said State of Georgia, and he was on the *Confederate* Pension Roll of the State and paid a pension of \$*1.00* in *Cherokee* County for 19*23* (per annum), on account of being a soldier in Company *25* Regiment *23* *So. Reg.* (Volunteers or State Militia).

That she is now a bona fide resident citizen of said State of *Georgia* and she has, continuously, resided there since *all her life* day of *19*.

Sworn to and subscribed before me, this the

24 day of *Oct.*, 192*3*.
Jacob Massey, Ordinary
of *Cherokee* County.

Hettie V. Henson
(Applicant)

(SEAL OF THE ORDINARY.)

Affidavit of Witness to Prove Marriage and Date of Death of Husband.

STATE OF GEORGIA,

COUNTY.

Personally before me comes _____ known to be a responsible and truthful person, residing in said County, who after having been duly sworn, says that of deponent's own personal knowledge, Mrs. _____, who made the foregoing affidavit, is the lawful widow of _____ who died in _____ County in said State of _____ on the _____ day of _____, 19____, and that she has not since remarried; that she became the wife of _____ on the _____ day of _____, 18____; that she and he had resided together as husband and wife, continuously, since _____ day of _____ 19____, and that _____ was the same man who was on the pension roll of said State _____ from _____ County _____ when he died.

Sworn to and subscribed before me, this the

_____ day of _____, 19____

Ordinary
of _____ County.

(SEAL OF ORDINARY)

MARRIAGE LICENSE

OF

AND

192

Book

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 copy of marriage of John A. Henson and Hettie V. Puckett 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 24th day of Oct. 1923.

Ordinary and ex-officio C.O.

the date of his death in Sept 28 1923 and that she has not since his death remarried; at the time of his death he was a resident of Cherokee County, in said State of Georgia, and he was on the Confederate Pension Roll of the State and paid a pension of \$1.00 in Cherokee County for 1923 (per annum), on account of being a soldier in Company 25 Regiment 23 Geo. Reg. (Volunteers or State Militia).

That she is now a bona fide resident citizen of said State of Georgia and she has, continuously, resided there since all her life day of 19.

Sworn to and subscribed before me, this the

24 day of Oct, 1923.

Jacob Massey, Ordinary
of Cherokee County.

Hettie V. Henson
(Applicant)

(SEAL OF THE ORDINARY.)

Affidavit of Witness to Prove Marriage and Date of Death of Husband.

STATE OF GEORGIA,

COUNTY.

Personally before me comes _____ known to be a responsible and truthful person, residing in said County, who after having been duly sworn, says that of deponent's own personal knowledge, Mrs. _____, who made the foregoing affidavit, is the lawful widow of _____ who died in _____ County in said State of _____ on the _____ day of _____, 19____, and that she has not since remarried; that she became the wife of _____ on the _____ day of _____, 18____; that she and he had resided together as husband and wife, continuously, since _____ day of _____, 19____, and that _____ was the same man who was on the pension roll of said State _____ from _____ County _____ when he died.

Sworn to and subscribed before me, this the

_____ day of _____, 19____

Ordinary

of _____ County.

(SEAL OF ORDINARY)

of the Court of Ordinary.
This 24th day of Oct. 1923.

Garot Massey
Ordinary and ex-officio C.O.

and wife, continuously, since _____ day of _____, 19____, and that _____
was the same man who was on the pension roll of said State _____ from _____
County _____ when he died.
Sworn to and subscribed before me, this the _____
_____ day of _____, 19____
_____ Ordinary _____
of _____ County, _____

(SEAL OF ORDINARY)

No. _____

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

John A. Henson and Hettie V. Puckett

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 12 day of Nov. 1870 192

W. R. D. Moss (L.S.) Ordinary

STATE OF GEORGIA **CERTIFICATE** CHEROKEE COUNTY

I Certify that John A. Henson *and* Hettie V. Puckett

were joined in Matrimony by me this 15 *day of* Nov. *1870*

and 1870

Recorded June 12, 1871 1924 J. T. Houston N.P.

W. R. D. Moss Ordinary

Sworn to and subscribed before me, this the

day of _____, 19____
Ordinary
of _____ County,

(SEAL OF ORDINARY)

No. _____



TO ANY JUDGE, JUSTICE OF THE PEACE, OR MINISTER OF THE GOSPEL

You are hereby authorized to join

John A. Henson and Hettie V. Puckett

*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 12 day of
Nov. 1870

W. R. D. Moss (L.S.)

STATE OF GEORGIA

CERTIFICATE

CHEROKEE COUNTY

I Certify that

John A. Henson

and

Hettie V. Puckett

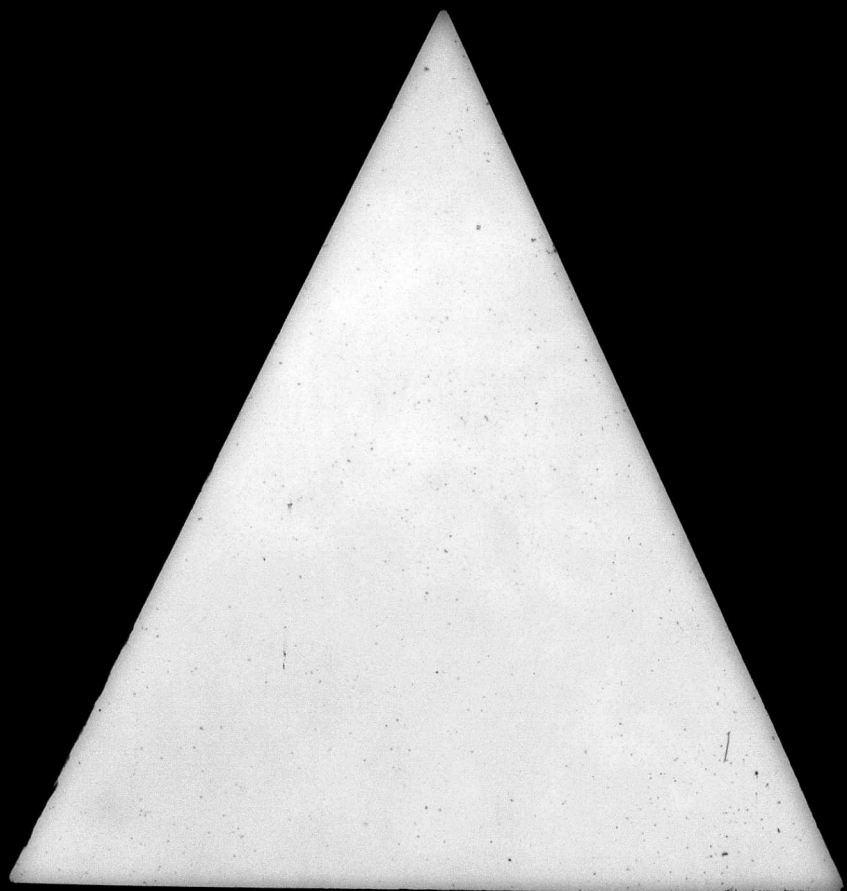
were joined in Matrimony by me this 15 day of Nov. 1870

Recorded June 12, 1871

J. T. Houston N.P.

W. R. D. Moss

Ordinary



Pension Office, 12/12/10.

It is not a sufficient excuse for a soldier's long and continued absence to say "Home Wounded". Must state and prove the cause and effect of the wounds, and why he was kept away from his duty. Give an honorable accounting of husband to the close of the war.

J. W. Lindsey, Com. of Pensions.

Henson, John A.
Cherokee Co.
7th 1912

+ No.

**Confederate
Soldier's Application.**

UNDER ACT 1910.

✓
County *Cherokee*

Name *John A. Henson*

Company *9*

Regiment *23rd Va*

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

10/23/10
11/6/11 ENTERED ROSTER OFFICE

Pension Office, 12/15/10.

It is not a sufficient excuse for a soldier's long and continued absence to say "Wounded". Must state and prove the cause and effect of the wounds, and why he was kept away from his duty. Give an honorable accounting of husband to the class of the war.

J.W. Lindsey, Com. of Pensions.

Soldier's Application.

UNDER ACT 1910.

Confederate

County

J. W. LINDSEY,

Commissioner of Pensions

CHAS. P. REED, State Printer, Atlanta.

11/6/11 ENTERED ROSTER OFFICE

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA.

Cherokee County, John A. Hanson 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) John A. Hanson residing in Cherokee County, Ga.

2. How long and since when have you been a continuous resident citizen of this State? Since July the 3rd of Nov. 1844.

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

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) Mar. 19th 1862 at Charleston, S.C. 33rd Co. Reg. Infantry

5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) Feb. 17th 1865

6. When and where was your Company and Regiment surrendered or discharged from the Service? I don't know

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 had been home since Feb. 19th 1865 until I was ordered there.

a. Where was your Command when you left it? Cannon Point, Ga.

b. When did you leave the Command? Feb. 19th 1865

c. For what cause did you leave? On leave

d. By whose authority did you leave? By the commanding officer

e. For how long was your leave granted? In what way? 10 days

f. Why did you not return to your Command after leave expired? Never saw for service

g. In what way were you prevented? Not able to

h. What effort did you make to return? Was not able to go back

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 4th Nov. 1908? (Make list by items and value) 188th 1865

10. What property of any kind have you or your wife disposed of and for what purpose since 4th 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) Same as above

12. What annual or monthly income or earnings of yourself and wife and the source derived have you? Small out of rent and my labor

13. Are you drawing a pension of any amount from the 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 13 day of Aug. 1908 } J. A. Harrison

J. A. Harrison Ordinary, of Cherokee County.

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA.

Cherokee County.

W. J. Lowery of said State and County is hereby presented as a witness in support of the application of John A. Thurman 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? W. J. Lowery - Canton Cherokee County Ga
2. How long and since when have you known J. A. Thurman the applicant? Since 1863
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? Canton Cherokee Co Ga has in this State all his life
4. When, where and in what Company and Regiment did John A. Thurman enlist during war from 1861 to 1865? (Give date and place) Mar. 19 1862 Canton Co. 4 23rd Reg
5. How did you obtain your information of this Service? I was in same company personal knowledge
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) from March 19 63 to Feb 19 64
7. When and where was his Command surrendered or discharged (give date and place) I don't know
8. Were you personally present at the Surrender? No
9. If not, where were you and how came you there? I was in Prison at Camp Chase Ohio
10. Was the applicant personally present with his Command at surrender? I don't know
11. If not where was he and how came him there? All I know he was wounded and sent home on crutches
12. When did he leave his Command? Feb 19 1864 Where was his Command when he left it? Canton Cherokee Co for what cause did he leave? Injured and wounded By whose authority did he leave? The Doctor and how long was he granted leave? I don't know How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) Personal knowledge - I was present
13. In what way was he prevented from returning to his Command? Not able How do you know? From the nature of his wound I don't believe he was able to return
14. What effort did he make to return to his Command and how do you know? I don't 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 16 day of Aug 1910 } W. J. Lowery Ordinary of Cherokee County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Cherokee County.

Personally before me comes W. A. Perry & J. W. Blanton who on oath says that they are freeholders residing in said County and we know John A. Thurman 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.) 100 acres of land Val \$600 - One house & lot 2 Canton Ga \$700 - one horse and wagon \$500 - Horse feed \$500 - Hay \$100, and Piggy \$50 forming total \$1500

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.) None
2. When and to whom was it sold or given to?
3. What was the price paid or stated to be paid?
4. What relation is the party to applicant? None
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 12 day of Oct 1910 } W. A. Perry Ordinary of Cherokee County.
W. J. Webb Ordinary of Cherokee County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Cherokee County.

I, W. J. Webb Ordinary of said County, certify that I know the applicant John A. Thurman for Pension is the person he represents himself to be and resides in said County. That I also know W. J. Lowery the witness swearing to the service and W. A. Perry & J. W. Blanton 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 Results of Cherokee shows that he and wife value for tax is in 1908 \$1031- for 1909 \$604 for 1910 \$1321

Sworn under my hand and official seal of office this 18 day of Oct 1910 } W. 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 judiciously.
 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.

W. J. WEBB
Ordinary
CHEROKEE COUNTY

F. M. BLACKWELL
Clerk
COURT OF ORDINARY

CANTON, GA October 20, 1911.

State of Georgia, Cherokee County.

J. N. Pugh of said County and State, being presented as a witness in support of the application of John A. Henson for pension under Act of 1910, after being duly sworn says:

That he has known the applicant since before the war, that they were neighbors during the Civil war, and that at the time he was too young to be in the services and was at home and knows that the applicant, John A. Henson came home in the spring of 1864, wounded in the neck and shoulder with a gunshot wound, and that he saw him every few days after that time until the close of the war, and for some time after the surrender, and that he was not able on account of said wound to return to his command, and that it was over a year after the surrender before the applicant was able to do anything. He was shot in the right shoulder and could not use that arm, gangrene had set up in the wound and it took it a long time to heal.

John N. Pugh

Sworn to and subscribed to
before me, Oct. 20, 1911.

W. J. Webb
Ordinary, Cherokee County.

Georgia, Cherokee County.

I hereby certify that J. N. Pugh is a resident of this county, and was sworn by me before answering any of the foregoing questions, and his statements are entitled to full faith and credit.

W. J. Webb
Ordinary, Cherokee County.

W. J. WEBB
Ordinary
CHEROKEE COUNTY

F. M. BLACKWELL
Clerk
COURT OF ORDINARY

CANTON, GA Sept. 16th 1911.

State of Georgia, Cherokee County.

T. T. Chamlee of said State and County, being presented as a witness in support of the application of J. A. Henson for pension under Act of 1910, after being duly sworn says:-

That he has known the applicant since before the war, that they were neighbors during the civil war, and that at the time he was too young to be in the service and was at home and knows that the applicant J. A. Henson came home in April 1864 wounded in neck and shoulder with gun shot wound, and that he saw him every few days after that time until the close of the war, and for some time after the surrender, and that he was not able on account of said wound to return to his command, and that it was over a year after the surrender before the applicant was able to do any thing.

He was shot in the right shoulder and could not use that arm, Gangrene had set up in the wound and it took it a long time to heal.

T. T. Chamlee

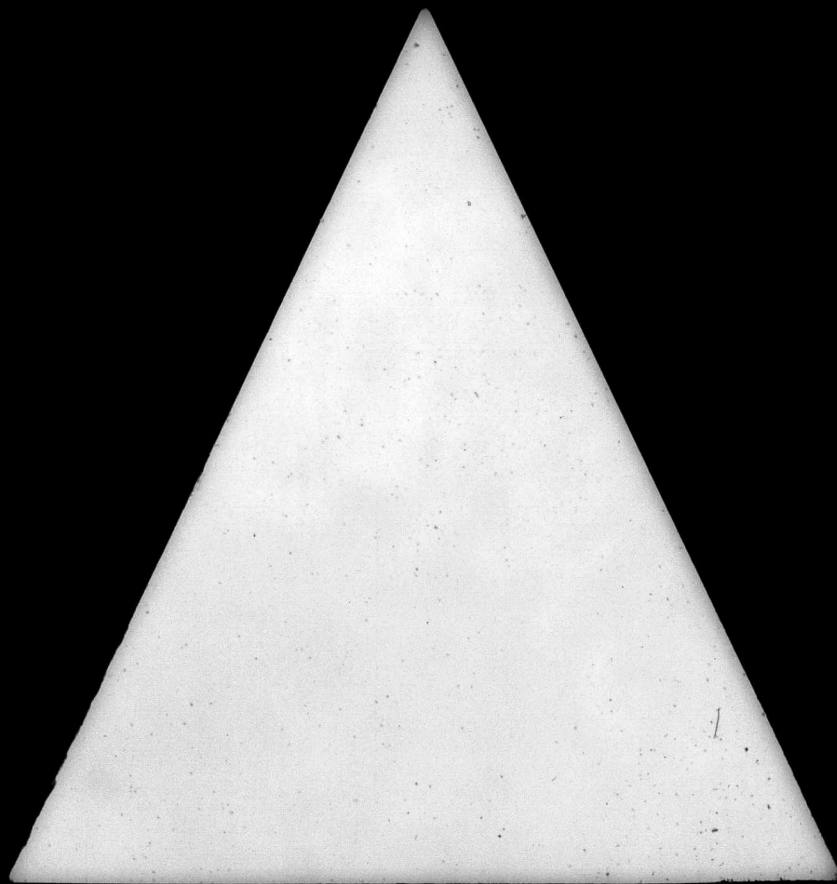
Sworn to and subscribed before me-

This Sept. 16th 1911.

W. J. Webb Ordinary.
Georgia, Cherokee County.

I hereby certify that T. T. Chamlee is a resident of this county, and was sworn by me before answering any of the foregoing questions, and that his statements are entitled to full faith and credit.

W. J. Webb Ord.



POWER OF ATTORNEY.

STATE OF GEORGIA,
County, }
*Cherokee*Know all Men by these Presents, That I, *Salina Higgins*of *Cherokee*County, in said State, do hereby appoint *Wm H Perkins*of *Cherokee County* 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 *Dec 17* day of *1891*Executed in the presence of us: *Salina Higgins* [L.S.]*J. E. Merritt*
H. K. Pittman

DIRECTIONS.

If allowed, send amount by _____ to _____, and oblige,
me at _____*Higgins, Salina*
Cherokee County
B43 1891.No. *4041*

Widows' Pension

— PAID TO —

Mrs. Salina Higgins

— 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,

Leta Higgins

Cherokee

County, in said State, do hereby appoint

of *Cherokee County*

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
day of *Feb* 1891

Executed in the presence of us:

J. E. Merritt
H. K. Petru

DIRECTIONS.

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



Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA.

County of *Schenck*

In person came before me, the undersigned Ordinary

in and for the County of *Schenck*

Mrs. *Gallie Higgins*, who being sworn according to law, says under oath that she is the widow of *Isaiah Higgins* who was a soldier in the service of the Confederate States, and served as a member of Company *B*, of the

43 Regiment of *Pa* Volunteers; that he enlisted in said

service on or about the _____ day of _____ 1862, and was in the

Confederate Army up to *June* 1864 That while in the

Army, he was on the _____ day of *June* 1864, (See Note No. 1)

He was captured at Kennesaw Mountain near Marietta Ga. And was
convinced to prison at a near Indianapolis
and has never seen her
husband since. but has heard that
he died in prison at Indianapolis

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 _____ day of _____ 18____, and that she has resided in Georgia continuously since the _____ day of _____ 1844; 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 _____ day of *Dec* 1891.

O. W. Portman

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.

Widows' Pension

PAID TO—

Mrs. Leta Higgins

Cherokee COUNTY.

\$100.00.

Warrant Issued

1891

AND HANDED TO

Geo. W. Harrison, State Printer Atlanta.

B. F. 1891.
Cherokee County

Affidavit for Three Witnesses.

Form No. 2.

STATE OF GEORGIA,

County of Cherokee } In person came before me, the undersigned Ordinary
J.W. Edwards R.M. Hunt } in and for said County, witnesses M.S. Padon

and (each known to said Attesting Officer as truthful, reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge, Mrs. Sally Higgins, of the County of Cherokee, State of Georgia, is the widow of Esaiiah Higgins who was a soldier, in Company B of the 49 Regiment of Ge. Volunteers. That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or about the day of 1862. That while in said service, or by reason of said service in the Army, he lost his life as follows: He was with his

Command on day June 1864 on Kennesaw Mountain on which day the command was in a skirmish fight on the road leading from Marietta to Dallas Ga. That he was missing after that fight and has never been heard of since. I kept that true word that he died in prison on Kennesaw Indianapolis Indiana

We further swear that Mrs. Sally Higgins 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 1 day of Dec 1891.

O.W. Putnam

Ordinary.

M.S. Padon
R.M. Hunt
J.W. Edwards.

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

Form No. 3.

STATE OF GEORGIA,

County of Cherokee } I, O.W. Putnam Ordinary
in and for said County of Cherokee

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

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 1 day of Dec 1891.



O.W. 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 C. Connor Ordinary in and for said County of
Cherokee State of Georgia, hereby certify that I am acquainted with Mrs.
Sallie Higgins 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
Isaac Higgins 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
24th day of January 1893.

[SEAL] Allen C. Connor Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, Cherokee County.
KNOW ALL MEN BY THESE PRESENTS, That I, Sally Higgins
of Woodstock Cherokee County
County, in said State, do hereby appoint William H. Harrison of Cherokee County
of Cherokee County 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 24th
day of January 1893.

Sally Higgins [L. S.]

Executed in the presence of us:

Allen C. Connor
Allen C. Connor, Ordinary

DIRECTIONS.

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

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

Form No. 2.

STATE OF GEORGIA, County of Cherokee
I, Allen C. Connor Ordinary in and for said County of
Cherokee State of Georgia, hereby certify that I am acquainted with Mrs.
Sallie Higgins 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 Isaac Higgins 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 24th day of January 1894.

[SEAL] Allen C. Connor Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, Cherokee County.
KNOW ALL MEN BY THESE PRESENTS, That I, Sally Higgins
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 17
day of January 1894.

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

Allen C. Connor
Allen C. Connor

DIRECTIONS.

Send amount by Chas. A. Connor to _____
me at Cherokee, and oblige Sallie Higgins

FOR THOSE HERETOFORE PAID,
1894.
No. 628
WIDOWS' PENSION,
year ending February 15th, 1894.
PAID TO _____
OF _____
WARRANT ISSUED
AND HANDED TO
1894.
Cherokee County.
Sallie Higgins

Higgins, Sally
Cherokee Co
FOR THOSE HERETOFORE PAID,
1893.
No. 604
WIDOWS' Pension,
for year ending February 15th, 1893.
PAID TO _____
OF _____
WARRANT ISSUED
AND HANDED TO
1893.
Cherokee County.
Sally Higgins

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cherokee

Personally comes Mrs.

Sallie Higgins

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 1846 That she is the Widow ofWash. Higgins who was a Soldier in Company C of the 42d Regiment of GeorgiaVolunteers, that he enlisted in said Regiment on or about the month of March1862 and served in the Army up to August 1864 That he lost hislife on the following day of 18 (State here

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

His Husband was taken Prisoner of war
was Penned up in mountain in Cobb County Ga.
and was taken back north and died as
a prisoner of war while in prison in
the year 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 1864; 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

24th day of January 1893.Wm. B. Brown Ordinary.x Sallie HigginsPost-office Woodstock, Ga.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cherokee

Personally comes Mrs.

Sallie Higgins

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 1870 That she is the Widow ofDeal Higgins who was a Soldier in CompanyB of the 43 Regiment of GaVolunteers, that he enlisted in said Regiment on or about the month of March1862 and served in the Army up to 1864 That he lost hislife on the 18 day of 18 (State here

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

captured near Kennesaw mountain in said State
and was carried north and died in Indiana
as prisoner

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 1874; 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

17 day of January 1894.A. C. Brown Ordinary.x Sallie HigginsPost-office Woodstock, Ga.

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

Form No. 2.

STATE OF GEORGIA, County of Cherokee
I, A. B. Corn Ordinary in and for said County of
Cherokee State of Georgia, hereby certify that I am acquainted with Mrs.
Sallie Higgins 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 Isaiah Higgins 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 11th day of January 1895.

{ SEAL }

A. B. Corn

Ordinary.

POWER OF ATTORNEY.

Form No. 3.

STATE OF GEORGIA, Cherokee County.

KNOW ALL MEN BY THESE PRESENTS, That I, Sallie Higgins
of Cherokee

County in said State, do hereby appoint Richard Johnson Sec. & Est.
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 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 11
day of January 1895.

Sallie Higgins

[L. S.]

Executed in the presence of us:

A. B. Corn Ordinary
W. J. Birk

DIRECTIONS.

Send amount by check to A. B. Corn Ordinary to
me at Benton Ga and oblige

Sallie Higgins
mark

WIDOW'S PENSION,
for year ending February 15th, 1895.
—PAID TO—
Mrs. Sallie Higgins
—OF—
Cherokee County.
widow of Isaiah Higgins
WARRANT ISSUED
January 15, 1895
AND HANDED TO
Atty
1895.

Geo. W. Harkness, State Printer.

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

Form No. 2.

STATE OF GEORGIA, County of Cherokee
I, A. B. Corn Ordinary in and for said County of
Cherokee State of Georgia, hereby certify that I am acquainted with Mrs.
Sallie Higgins 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 Isaiah Higgins
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 11th day of January 1895.

{ SEAL }

A. B. Corn

Ordinary.

POWER OF ATTORNEY.

Form No. 3.

STATE OF GEORGIA, Cherokee County.

I, Sallie Higgins hereby authorize William A. Wright
of Atlanta Ga to receive and receipt for the pension paid hereon and request
that he remit same to A. B. Corn Ordinary at Benton Ga. Chas. B. Cook

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this the 2nd
day of January 1895.

Sallie Higgins

[L. S.]

Executed in the presence of

A. B. Corn Ordinary
of Cherokee County

WIDOW'S PENSION,
for year ending February 15th, 1895.
PAID TO
Mrs. Sallie Higgins
OF
Cherokee County.
widow of Isaiah Higgins
WARRANT ISSUED
21
AND HANDED TO
Atty
1895.

Geo. W. Harkness, State Printer.

Higgins, Sallie
FOR THOSE HERETOFORE PAID.
1896.

No. 234

For Widows' Heretofore Allowed Pensions.

Form 1.

STATE OF GEORGIA,
County of Cherokee

Personally Comes Mrs.

Sallie Higgins

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 1864 That she is the Widow of
Isaiah Higgins who was a Soldier in Company
B of the 43 Regiment of Georgia

Volunteers, that he enlisted in said Regiment on or about the month of
1862 and served in the Army up to 1864 That he lost his
life on the day of 1864 (State here

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

Said husband was taken prisoner of war near
Kennesa Mountain in Cobb County Ga and died
in northern prison

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 1864, that Georgia is her home and she resided in this State 23d day
of December, 1890, and has not lived in any other State or locality since that date. I have
been allowed a pension for the year ending February 15th, 1894, and now apply for the
allowance provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this

11th day of January 1895.

D. L. Lamm Ordinary.

Sallie Higgins

Post-office Hampton

For Widows Heretofore Allowed Pensions.

Form 1.

STATE OF GEORGIA,
County of Cherokee

Personally Comes Mrs.

Sallie Higgins

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 about 1848 That she is the Widow of
Isaiah Higgins who was a Soldier in Company
B of the 43 Regiment of Georgia
Volunteers, that he enlisted in said regiment on or about the month of March
1862 and served in the Army up to The fall of 1864 That he lost his
life on the day of 1865 (State here

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

was taken prisoner of war near Marietta Ga
and died in Northern Prison

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 1864,
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

Second day of January 1896.

D. L. Lamm Ordinary.

Sallie Higgins

Post-office

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

STATE OF GEORGIA, County of Cherokee
 I, A. C. Berry Ordinary in and for said County of
Cherokee State of Georgia, hereby certify that I am acquainted with Mrs.
Sallie Higgins 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 Isaac Higgins
 deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1896.
 In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this
 the 16th day of Jan 1897,
 {SEAL} A. C. Berry Ordinary.

Form No. 2.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cherokee County.
 I, Sallie Higgins hereby authorize Wm. A. Wright
 of Atlanta to receive and receipt for the pension paid hereon and request
 that he remit same to A. C. Berry ordinary at Canton Ga
 In Witness Whereof, I have hereunto set my hand and seal, this 16th
 day of Jan 1897. Sallie Higgins [L. S.]
 Executed in the presence of

Higgins Sallie
 Cherokee Co

For Those Heretofore Paid.

1898.

NO. 1969

WIDOW'S PENSION.

For year ending February 15th, 1898.

PAID TO

Mrs. Sallie Higgins

of
Cherokee
Isaac Higgins

County,

Widow of Isaac HigginsRICHARD JOHNSON,
 Commissioner of Pensions.

WARRANT ISSUED

2/1 1898.

AND HANDED TO

W. A. W.

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

AND HANDED TO

2/1 1897.

WARRANT ISSUED

RICHARD JOHNSON,
 Commissioner of Pensions.widow of Isaac HigginsCherokee County.OF
Sallie Higgins

PAID TO

for year ending February 15th, 1897.

WIDOW'S PENSION,

No. 629

1897.

FOR THOSE HERETOFORE PAID.

Higgins Sallie
 Cherokee County

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of charlotte

Personally Comes Mrs.

Sallie Higgins

who being sworn, says on oath, that she is a bona fide resident of said county of charlotte State of Georgia, and that she has RESIDED in said State continuously ever since 1850. That she is the Widow of

Isaiah Higgins

who was a Soldier in Company

B of the 43 Regiment of Co

Volunteers, that he enlisted in said regiment on or about the month of March 1862 and served in the Army up to Oct 1864. That he lost his

life on the day of 18 . (State here full particulars of the husband's death, when, where and from what cause.)

Said husband was taken Prisoner of war at or near Kennew Mountain in Cobb Co. Ga in 1864 and never returned home

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 1854, 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 charlotte 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 16th day of Jan 1897.
A. C. Croom Ordinary.

Post-office

Sallie Higgins

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of charlotte

Personally Comes Mrs.

Sallie Higgins

who, being sworn, says on oath, that she is a bona fide resident of said county of charlotte State of Georgia, and that she has RESIDED in said State continuously ever since about 1844. That she is the Widow of

Isaiah Higgins

who was a Soldier in Company

B of the 43 Regiment of Co

Volunteers, that he enlisted in said regiment on or about the month of March 1862 and served in the Army up to fall 1864. That he lost his

life on the day of 18 . (State here full particulars of the husband's death, when, where and from what cause.)

was taken Prisoner in summer of fall of 1864 was taken back north and died in fall of 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 1854.

I have been allowed a pension as a resident of charlotte County for the year ending February 15th, 1897, and now apply for the pension provided by law for the year ending February 15th, 1898.

Sworn to and subscribed before me, this 10th day of Jan 1898.
A. C. Croom Ordinary. Sallie Higgins Post-Office

State of Georgia,

charlotte County.I A. C. Croom Ordinary of said County, certify that I am well acquainted

with Mrs. Sallie Higgins 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 1844.

Given under my official signature and seal this the 10th day of Jan 1898.

A. C. CroomOrdinary of charlotte County.

Official Seal.

POWER OF ATTORNEY.

State of Georgia,

Cherokee County.

I, Sallie Higgins hereby authorize W. H. Wiggins
of Atlanta Ga

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

A. C. Burns at Boston Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 14

day of January 1899.

Sallie Higgins [L. S.]

Executed in presence of

A. C. Burns ending

Higgins, Sallie
Cherokee County
For Those Heretofore Paid.

1899.

NO. 977

WIDOW'S PENSION,

For year ending February 15th, 1899.

PAID TO

Mrs. Sallie Higgins

OF

Cherokee County

Widow of Isaac Higgins

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

211 1899.

AND HANDED TO

nan

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, Sallie Higgins hereby authorize W. H. Wiggins
of Atlanta Ga

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

A. C. Burns ending at Boston Ga by check

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 14

day of Jan 1900.

Sallie Higgins [L. S.]

Executed in presence of

A. C. Burns, ending

Higgins, Sallie
Cherokee County
To Those Heretofore Paid.

1900.

NO. 879

WIDOW'S PENSION,

For year ending February 15th, 1900.

PAID TO

Mrs. Sallie Higgins

OF

Cherokee County,

Widow of

JNO. W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

Feb 13 1900.

AND HANDED TO

Wiggins

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Cherokee

Personally Comes Mrs.

Sallie Higgins

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

1848 That she is the Widow of

Isaac Higgins

who was a soldier in Company

B of the 42Regiment of CoVolunteers, that he enlisted in said regiment on or about the month of March1862 and served in the Army up to fall of 1864 That he lost his

life on the _____ day of _____ 18____ (State here

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

Died in Northern Prison in Spring of 1865

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 1854.

I have been allowed a pension as a resident of Cherokee County for the year ending February 15th, 1898, and now apply for the pension provided by law for the year ending February 15th, 1899.

Sworn to and subscribed before me, this

14th day of January 1899.A. C. Carr Ordinary.

Post-Office

Sallie HigginsState of Georgia,
County of CherokeeI A. C. Carr

Ordinary of said County, certify that I am well acquainted

with Mrs. Sallie Higgins 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 _____ 1848

Given under my official signature and seal this the 14th day of January 1899.A. C. CarrOrdinary of Cherokee County.Official
Seal.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Cherokee

Personally Comes Mrs.

Sallie Higgins

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

1848 That she is the Widow of

Isaac Higgins

who was a soldier in Company

B of the 42^dRegiment of CoVolunteers, that he enlisted in said regiment on or about the month of Mar1862 and served in the Army up to the summer of 1864 That he lost his

life on the _____ day of _____ 18____ (State here

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

Said husband died in the fall of 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 1854.

I have been allowed a pension as a resident of Cherokee County for the year ending February 15th, 1892, and now apply for the pension provided by law for the year ending February 15th, 1900.

Sworn to and subscribed before me, this

5th day of June 1900.A. C. Carr Ordinary.

Post-Office

Sallie HigginsState of Georgia,
County of CherokeeI A. C. Carr

Ordinary of said County, certify that I am well acquainted

with Mrs. Sallie Higgins 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 _____ 1848

Given under my official signature and seal, this the 5th day of June 1900.A. C. CarrOrdinary of Cherokee County.Official
Seal.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, Sallie Higgins hereby authorize
A. B. Carson of Cherokee County
to receive and receipt for the pension paid hereon and request that he remit same to
me at Cartersburg

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 26
day of January 1901.

Sallie Higgins [L. S.]

Executed in presence of

A. B. Carson

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, Sallie Higgins hereby authorize
A. B. Carson of Cherokee County
to receive and receipt for the pension paid hereon, and request that he remit same to
me at Cartersburg

In Witness Whereof, I have hereunto set my hand and seal, this 15
day of January 1902.

Sallie Higgins [L. S.]

Executed in presence of

J. D. Price

Higgins, Sallie
Cherokee County

To Those Heretofore Paid.

1901.

No. 2467

WIDOW'S PENSION,

For year ending February 15th, 1901.

PAID TO
Mrs. Sallie Higgins

OF
Cherokee County
Widow of Mark Higgins

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

2/12 1901,

AND HANDED TO

Carson

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

Higgins, Sallie
Cherokee County

To Those Heretofore Paid.

1902.

No. 1853

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mrs. Sallie Higgins

OF

Cherokee County

Widow of Mark Higgins

Co. D Regiment 43rd

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

2/4 1902

AND HANDED TO

Carson

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

STATE OF GEORGIA

PERSONALTY COMES WITH

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

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

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cherokee

Personally Comes Mrs.

Sallie Higgins

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 about 1858. That she is the Widow of Isaac Higgins who was a soldier in Company B of the 48th Regiment of La Volunteers, that he enlisted in said regiment on or about the month of March 1862, and served in the Army up to fall of 1864. That he lost his life in the Spring of the summer 1864. (State here particulars of the husband's death, when, where and from what cause) from disease contracted in the army

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 1854.

I have been allowed a pension as a resident of Cherokee County for the year ending February 15th, 1900, and now apply for the pension provided by law for the year ending February 15th, 1901.

Sworn to and subscribed before me, this 26th day of May 1901.
A. C. Conn Ordinary.

Sallie Higgins
 Post Office

State of Georgia,

Cherokee County.

I, A. C. Conn
 Ordinary of said County, certify that I am well acquainted

with Mrs. Sallie Higgins, 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 26th day of May 1858.

Given under my official signature and seal, this the 26th day of May 1901.

Official
 Seal.

Ordinary of Cherokee County.

HOME OF ALLOKIA

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cherokee

PERSONALLY COMES MRS.

Sallie Higgins

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 54 yrs. That she is the Widow of Isaac Higgins who was a soldier in Company B of the 43rd Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of March 1862, and served in the Army up to 1864. That he lost his life on the day of 1863. (State here particulars of the husband's death, when, where and from what cause) died in prison

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 1854.

I have been paid a pension as a resident of Cherokee County for the year ending December 31, 1901, and now apply for the pension provided by law for the year ending December 31, 1902.

Sworn to and subscribed before me, this 15th day of May 1902.
A. C. Conn Ordinary.

Sallie Higgins
 Post Office Kishabing Ga

State of Georgia,

Cherokee County.I, A. C. Conn

Ordinary of said County, certify that I am well acquainted with Mrs. Sallie Higgins, 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 15th day of May 1858.

Given under my official signature and seal, this the 15th day of May 1902.

Official
 Seal.

A. C. Conn
 Ordinary of Cherokee County.

NOTE.—All blank spaces must be filled.
 Voucher and affidavit must bear date after January 1st, 1902.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County. }

I, Sallie Higgins hereby authorize
A. B. Brown of Cherokee County
 to receive and receipt for the pension paid hereon and request that he remit same to
me at Canton Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 26th
 day of January 1901.

Sallie Higgins [L. S.]

Executed in presence of

A. B. Brown, Clerk

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County. }

I, Sallie Higgins hereby authorize
A. B. Brown of Canton Ga
 to receive and receipt for the pension paid hereon, and request that he remit same to
me at Canton Ga

In Witness Whereof, I have hereunto set my hand and seal, this 15th
 day of Jan 1902.

Sallie Higgins [L. S.]

Executed in presence of

Geo. W. Harrison

Higgins, Sallie
Cherokee County

To Those Heretofore Paid.

1901.

No. 2467

WIDOW'S PENSION,

For year ending February 15th, 1901.

PAID TO

Mrs. Sallie Higgins

OF

Cherokee County.

Widow of Clark Higgins

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

2/12 1901,

AND HANDED TO

Geo

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

Higgins, Sallie
Cherokee County
 To Those Heretofore Paid

1902.

No. 1853

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mrs. Sallie Higgins

OF

Cherokee County.

Widow of Clark Higgins

Co. D Regiment 43rd Ia

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

24 1902

AND HANDED TO

Geo

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

STATE OF GEORGIA

PERSONAL COPY FILE

FOR WIDOWS HERETOFORE ALLOWED PENSIONS

FOR WIDOWS HERETOFORE ALLOWED PENSIONS

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY.

I, Sallie Higgins, hereby authorize

Mr. A. Wright of Atlanta Ga.

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

A. C. Cunningham at Easton Ga.

In Witness Whereof, I have hereunto set my hand and seal, this 6th

day of January, 1903.

Sallie Higgins [L. S.]

Executed in presence of

A. C. Cunningham

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY.

I, Sallie Higgins, hereby authorize

Mr. A. Wright of Atlanta Ga.

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

A. C. Cunningham at Easton Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 11th

day of January, 1904.

Sallie Higgins [L. S.]

Executed in presence of

A. C. Cunningham

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mrs. Sallie Higgins

OF

Cherokee County,

Widow of Isaac Higgins

Co. B Regiment 48th La.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1903.

AND REMITTED TO

A. C. Cunningham

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

WIDOW'S PENSION

FOR

YEAR ENDING DECEMBER 31, 1904.

PAID TO

Mrs. Sallie Higgins

Widow of Isaac Higgins

Co. B Regiment 48th La.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1904.

AND REMITTED TO

A. C. Cunningham

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

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

PERSONALLY COMES MRS.

County of CherokeeSallie Higgins

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 1848. That she is the Widow of Isiah Higgins who was a soldier in Company B of the 43rd Regiment of Inf. Volunteers, that he enlisted in said regiment on or about the month of March 1862, and served in the Army up to March 1864. That he lost his life on the _____ day of _____ 1864. (State here particulars of the husband's death, when, where and from what cause.)

Died in Indiana in 1865

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 1864.

I have been paid a pension as a resident of Cherokee County for the year ending December 31, 1902, and now apply for the pension provided by law for the year ending December 31, 1903.

Sworn to and subscribed before me,
this 6th day of July 1903.
W. C. Brown Ordinary.

Post-Office

Sallie Higgins

State of Georgia,

I, W. C. BrownCherokee County.

Ordinary of said County, certify that I am well

acquainted with Mrs. Sallie Higgins, 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 _____ 1848.

Given under my official signature and seal, this the 6th day of July 1903.

Official
Seal.

W. C. Brown
Ordinary of Cherokee County.

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1903.

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

PERSONALLY COMES MRS.

County of CherokeeSallie Higgins

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 1848. That she is the Widow of Isiah Higgins who was a soldier in Company B of the 43rd Regiment of Inf. Volunteers, that he enlisted in said regiment on or about the month of March 1862, and served in the Army up to March 1864. That he lost his life on the _____ day of _____ 1864. (State here particulars of the husband's death, when, where and from what cause.)

Died in some of the northern States

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 1864.

I have been paid a pension as a resident of Cherokee County for the year ending December 31, 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me,
this 11th day of July 1904.
W. C. Brown Ordinary.

Post-Office

Sallie Higgins

State of Georgia,

I, W. C. BrownCherokee County.

Ordinary of said County, certify that I am well

acquainted with Mrs. Sallie Higgins, 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 _____ 1848.

Given under my official signature and seal, this the 11th day of July 1904.

Official
Seal.

W. C. Brown
Ordinary of Cherokee County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY.

I, Sallie Higgins, hereby authorize

W. J. Mott of Cherokee County

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 14

day of Jan 1905.

Sallie Higgins [L. S.]

Executed in presence of

J. D. Mott

Higgins Sallie
Cherokee County
To Those Heretofore Paid.

1905.

No. 1991

WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO
Mrs. Sallie Higgins

OF

Cherokee County,

Widow of Osair Higgins

Co. B. Regiment 43rd Pa

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

B 23 1905.

AND HANDED TO

Mott

The Public Pension and Pensions Act, Georgia,
Chas. W. Lindsey, Commissioner of Pensions.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cherokee

PERSONALLY COMES MRS.

Sallie Higgins

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 1867. That she is the Widow of Isaiah Higgins who was a soldier in Company B of the 4th Regt Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of March 1862, and served in the Army up to 1864. That he lost his life on the _____ day of _____ 1864. (State here particulars of the husband's death, when, where and from what cause.)

Supposed died in prison 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 1864.

I have been paid a pension as a resident of Cherokee County for the year ending December 31, 1904, and now apply for the pension provided by law for the year ending December 31, 1905.

Sworn to and subscribed before me,
this 14th day of Jan 1905.
W. J. Webb, Ordinary.

Sallie Higgins
Post-Office _____

State of Georgia,

Cherokee County.I, W. J. Webb

Ordinary of said County, certify that I am well

acquainted with Mrs. Sallie Higgins, 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 14th day of January 1867.

Given under my official signature and seal, this the 14 day of Jan 1905.

Official
Seal.

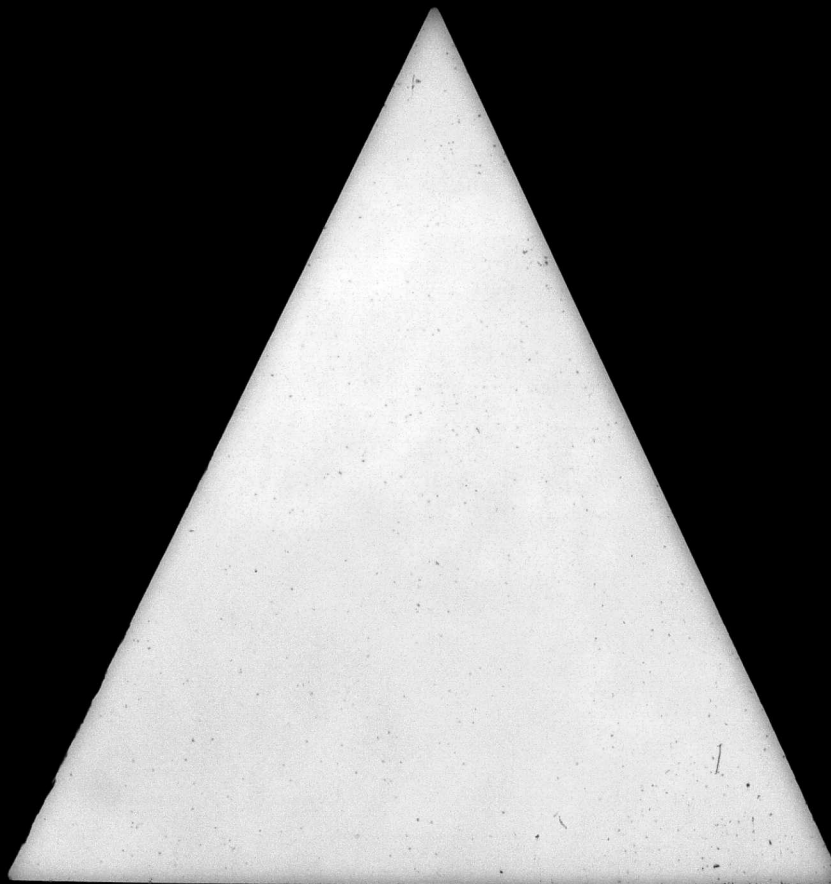
Ordinary of Cherokee County.

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

Official
Seal.

W. J. Webb
Ordinary of Chewee County.

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1903.



AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Cherokee COUNTY.

Personally came before me M. J. Coker and J. S. Cochrane, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully

J. H. Hill, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

Mr. Hill is and has suffered with Chronic Rheumatism ever since the war which renders him unable to earn a support.

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

Sworn to and subscribed before me, this the 14 day of September, 1904.
M. J. Coker, M. D.
J. S. Cochrane, M. D. Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cherokee COUNTY.

I, A. C. Carr Ordinary in and for said County, hereby certify that the applicant James H. Hill resides in said County, and has been a bona fide resident of this State since the 14 day of March, 1861, and that the witnesses, viz: M. J. Coker and J. S. Cochrane

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 digests of Cherokee County show that applicant returned for taxation in his name in 1899 in 1902 no return Dollars of property, and in 1903 no return Dollars of property.

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

Witness my hand and seal of office, this 14 day of Sept, 1904.
A. C. Carr Ordinary,
of Cherokee County

NOTE.

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

QUESTIONS FOR WITNESS.

Questions for Applicant.

STATE OF GEORGIA,

Cherokee County.

Between James H. Hill 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, answers to make to the following questions, deposes and swears as follows:

1. What is your name and where do you reside? James H. Hill, Cherokee County, Georgia
2. How long and since when have you been a resident of this State? Since 1861
3. When and where were you born? 1841, Nahunta, Ga.
4. When and where and in what company and regiment did you enlist or serve? 1861, Co. H, 1st Regt. N. H. M., Nahunta, Ga.
5. How long did you remain in such company and regiment? 1861, 1862

6. When and where was your company and regiment surrendered and discharged? State of Ga.

7. Were you present with your company and regiment when it was surrendered? yes
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? In June 1864 near Atlanta, Ga.

9. How much can you earn (gross) per annum by your own exertions? None
10. What has been your occupation since 1865? None
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"? Age and poverty
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? Since 1865
13. If upon the second, give a full and complete history of the infirmity and its extent? None
14. If upon the third, state whether you are totally blind and when and where you lost your sight? None

13. What property, real or personal, or income, do you possess, and its gross value? None
14. What property, real or personal, did you possess in 1894, 1896, 1897, 1898, 1899 and 1900 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 retain for taxation? Cherokee County
16. How were you supported during the years 1899 and 1900? By family
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor, or investment? None
18. What was your employment during 1898 and 1899? What pay did you receive in each year? None
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? None

20. Are you receiving any pension? None

21. Have you ever made an application for pension before? None
22. How many applications have you ever made and under what class? None

Sworn to and subscribed before me this the 14 day of Sept, 1904.
A. C. Carr Ordinary,
of Cherokee County.

Every Question MUST be Answered.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Habersham COUNTY.

A. J. Hill of said State and County, having been presented

as a witness in support of the application of A. J. Hill for pension under section 1254, Code, and after being duly sworn true answers to make to the following questions, deposed and answers as follows:

1. What is your name and where do you reside? A. J. Hill, reside in Habersham County, Georgia.

2. Are you acquainted with A. J. Hill the applicant; if so, how long have you known him? Yes, I have known him all his life.

3. Where does he reside, and how long and since when has he been a resident of this State? He resides in Cherokee Co Ga.

4. When, where and in what company and regiment did he enlist, and how do you know? He first served in 1st State Troops, served his time out then went as recruit in Co "E" 33rd Inf. July 1862. I was with him.

5. Were you a member of the same company and regiment? Yes.

6. How long did he perform regular military duty? About four years.

7. When and where was his command surrendered? Do not know of my own knowledge, as we were in prison.

8. Were you present when it surrendered? No.

9. Was applicant present? No, was in camp Douglas.

10. If he was not present, where was he? In Camp Douglas as all.

When did he leave his command? July 23, 1864. For what cause? Captured.

By what authority he left? By force of Federal. How do you know all of this? I was with him.

11. What property, effects or income has the applicant? (Give your means of knowledge.) He had none when he left this county.

12. What property, effects or income did the applicant possess in 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, did he make of same?

13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom?

14. What is the applicant's occupation and physical condition? He has been afflicted from effects of being over since he was in Camp Douglas.

15. Is the applicant unable to support himself by labor of any sort, if so, why? He was not when here. He and his children lived together.

16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? Do not know.

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

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? He has Rheumatism and general debility from exposure and age.

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

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

Sworn to and subscribed before me, this the 10 day of Sept, 1908. A. J. Hill Witness.

M. Franklin Ordinary.

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

Sworn to and subscribed before me, this the _____ day of _____, 1908. }

Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Habersham COUNTY.

I, M. Franklin Ordinary, in and for said County, hereby certify

that the applicant A. J. Hill resides in said County, and has

been a bona fide resident of this State since the _____ day of _____, 1908.

and that the witnesses, viz.: A. J. Hill

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

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

I further certify that the tax digest of _____ County shows that applicant

returned for taxation to his name in 1899 _____ Dollars of

property, and in 1900 _____ Dollars of property, in 1901

_____ Dollars of property, in 1902 _____ Dollars of property.

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

Witness my hand and seal of office, this 10 day of Sept, 1908.

M. Franklin Ordinary, of Habersham County.

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY. }

I, J. H. Hill hereby authorize
Mr. J. Wright of Cherokee Atlanta Ga
 to receive and receipt for the pension allowed and request that he remit same to
A. C. Cunningham at Canton Ga
 by check

Witness my hand and seal, this 13th day of January 1904.

J. H. Hill [L. S.]

Executed in presence of

A. C. Cunningham

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY. }

I, J. H. Hill hereby authorize
Mr. J. Wright of Cherokee County
 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 10 day of Jan 1905.

J. H. Hill [L. S.]

Executed in the presence of

J. H. Hill

Hill, James H.
Cherokee Co.,
 (FOR THOSE ALREADY ENROLLED.)

CODE SECTION 1367.

No. 5029

INDIGENT

SOLDIER'S PENSION

1904.

Name J. H. Hill

County Cherokee

Co. A Regiment 52nd

This pension was allowed 1903
Georgia

WARRANT ISSUED

1904.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT FORWARDED TO

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

no data

Hill, James H.

Cherokee Co.

(FOR THOSE ALREADY ENROLLED.)

A-52 No. 1631

INDIGENT

SOLDIER'S PENSION

1905.

Name J. H. Hill

County Cherokee

Co. A Regiment 52nd

WARRANT ISSUED

FEB 23 1905.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT FORWARDED TO

Geo. W. Harrison, State Printer, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears J. H. Hill 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 day of 1841; that he is 63 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of nearly year in Company , of 52 th Regiment of Georgia; that his physical condition is as follows: Has Rheumatism and is very feeble

is not able to do but very little labor
that his property consists of the following items: no return

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of this same place County been allowed a pension for the year 1 approved in 1903

Sworn to and subscribed before me, this the 13 day of Jan, 1904. } J. H. Hill
W. C. Lamm Ordinary.

STATE OF GEORGIA,

Cherokee County.

I, W. C. Lamm Ordinary of said County, do certify that I am well acquainted with J. H. Hill 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 10 day of Jan, 1904.

W. C. Lamm
Ordinary Cherokee County.



NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1905.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears J. H. Hill 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 11 day of March 1841; that he is 63 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served for the term of 4 in Company A, of 52 th Regiment of Ga; that his physical condition is as follows: Has Rheumatism and general disability

that his property consists of the following items: none except
Home hold

of the value of 20 Dollars. I am now earning, by my labor, Two Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of Cherokee County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the 10 day of Jan, 1905. } J. H. Hill
W. J. Misa Ordinary.

STATE OF GEORGIA,

Cherokee County.

I, W. J. Misa Ordinary of said County, do certify that I am well acquainted with J. H. Hill 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 10 day of Jan, 1905.

W. J. Misa
Ordinary Cherokee County.



NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1905.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY.

I, James H. Hill hereby authorize

W. J. Webb of

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

at

by

WITNESS my hand and seal, this 5 day of Jan 1906.

J. H. Hill [L. S.]

Executed in the presence of

W. J. Webb

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY.

I, James H. Hill hereby authorize

W. J. Webb of Canton

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

at Canton

by

WITNESS my hand and seal, this 3rd day of Jan 1907.

J. H. Hill [L. S.]

Executed in presence of

F. M. Blackwell

Hill, James H.
Cherokee County

Cons. Section 1234.

(FOR THOSE ALREADY ENROLLED.)

A-52 No. 2438

INDIGENT

**SOLDIER'S PENSION
1906.**

Name James H. Hill

County Cherokee

Co. A Regiment 52nd Ga

WARRANT ISSUED

FEB 1 1906.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W. J. Webb

The Franklin Printing and Publishing Co., Oak St., Nashville, Tenn.

no data

Hill, James H.
Cherokee Co.

A-52

Cons. Section 1234.

(FOR THOSE ALREADY ENROLLED.)

No. 6046

INDIGENT

**SOLDIER'S PENSION
1907.**

Name James H. Hill

County Cherokee

Co. A Regiment 52nd Ga

WARRANT ISSUED

FEB 13 1907.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W. J. Webb

The Franklin Printing and Publishing Co., Oak St., Nashville, Tenn.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Cherokee County.

Personally appears Jas. H. Hill 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 _____ day of _____ 1841; that he is 65 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served for the term of 3 in Company A, of 52th Regiment of Ga Vol.; that his physical condition is as follows: Infirmity and poverty

that his property consists of the following items: House hold
one cow

of the value of Thirty 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 1906. I have heretofore, as a resident of Cherokee County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this the 8 day of Jan 1906. J. H. Hill
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 Jas. H. Hill the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal, this 8 day of Jan 1906.

Ordinary Cherokee County.



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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Cherokee County.

Personally appears Jas. H. Hill 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 _____ day of _____ 1841; that he is 65 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs in Company A, of 52th Regiment of Georgia Vol.; that his physical condition is as follows: Infirmity poverty

that his property consists of the following items: Small amount
of household

of the value of Twenty 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 3 day of Jan 1907. Jas. H. Hill
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 Jas. H. Hill 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 3 day of January 1907.

Ordinary Cherokee County.



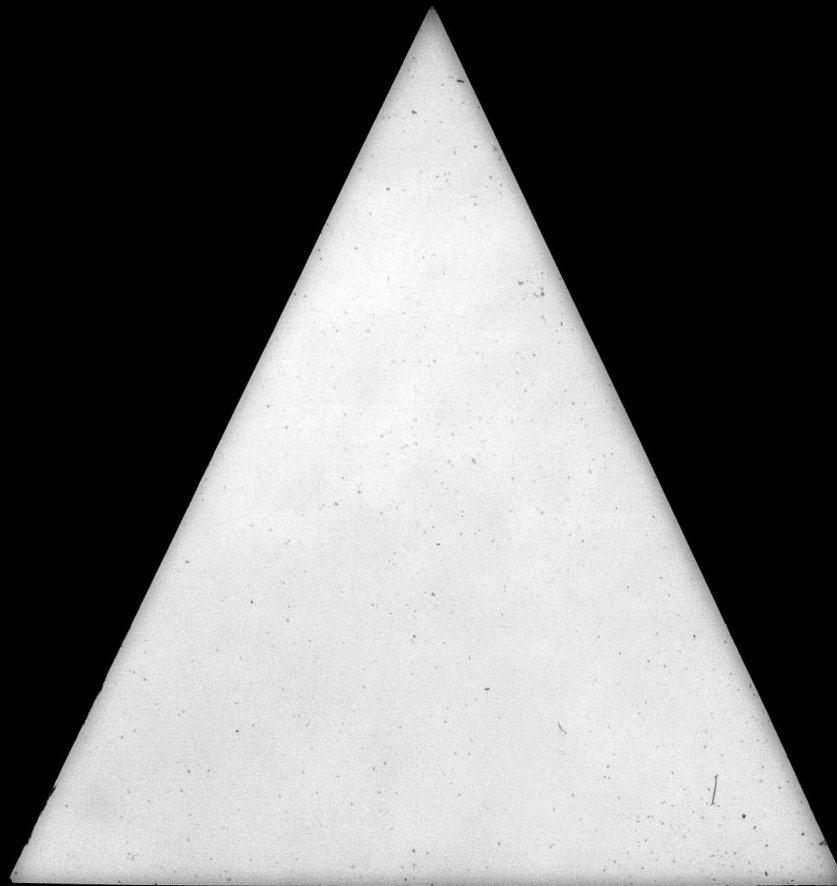
NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1907.

seat
here

Primary _____ County.

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

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



Hilly, William

Cherokee

No. *1176*

APPLICATION FOR ALLOWANCE

FOR YEAR ENDING OCT. 31, 1900.

Septam de adler

Applicant *William Hill*

County *Cherokee*

Amount *50*

Date of Warrant *March*

Entered on Record

March 1889
mt

SECRETARY EXECUTIVE DEPARTMENT

C. J. Maddox

Hill, William

Cherokee

No. 1476

APPLICATION FOR ALLOWANCE

FOR YEAR ENDING, OCT. 24, 1889.

FOR

Applicant: William Hill

County: Cherokee

Amount: 52

Date of Warrant: March 19, 1889

Entered on Record:

McL...

SECRETARY EXECUTIVE DEPARTMENT

Cornwall



STATE OF GEORGIA.

Cherokee County.

PERSONALLY appears William Hill 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 day of 1850; that he enlisted in the military service of the Confederate States (one of the States of) during the war between the States, and served as a Private in Company 11, of 18th Regiment of

Volunteers. Whipple's Brigade; that whilst engaged in such military service, at the battle of Lookout Landing, in the State of Ala., on the day of August, 1862, he was wounded as follows:

Gun shot wound through the left elbow joint, destroying the joint. The joint was then put up with a brace and four inches short, when rendering great pain substantially cured and essentially useless.

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

Sworn to and subscribed before me, this the 22 day of July 1889, William Hill his mark

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

STATE OF GEORGIA.

Cherokee County.

PERSONALLY comes before me J. M. Frazier Ordinary of said county, J. M. Frazier and W. L. Coleman both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined Wm Hill, and after such examination say that the applicant has been injured as follows:

Gun shot wound through left elbow joint. Completely destroying the joint which is now ankylosed, and the arm is much shorter than the other arm and painful away until it is useless.

Sworn to and subscribed before me, this 22 day of July 1889, J. M. Frazier M.D. W. L. Coleman M.D.

ORDINARY.

Notar. 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, *O. W. Putnam*, Ordinary of said county, do certify that I am well acquainted with *William Hill*, 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: *J. M. Lusk* and *W. F. Culbreth*

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

Given under my official signature and seal, this *22* day of *February*, 1889

O. W. Putnam

Ordinary *Cherokee* County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

KNOW ALL MEN BY THESE PRESENTS, That I, *William Hill* of *Cherokee* county, in said State, do hereby appoint *E. D. McLeod* of *Cherokee* 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 *22* day of *February*, 1889

William Hill (L. S.)

Executed in the presence of us:

J. H. Chapman
O. W. Putnam, Ordinary

DIRECTION:

Send money to me as follows, by _____ to _____ P. O. _____ 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, *Oscar W. Putnam* Ordinary of said county, do certify that I am well acquainted with *William Hill* 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 *5th* day of *Feb* 189*0*.

Oscar W. Putnam

Ordinary *Cherokee* County.

Hill, William
Cherokee Co
1890.

No *284*

APPLICATION FOR ALLOWANCE.

FOR THE YEAR ENDING OCTOBER 31, 1891.

FOR—

Left Arm the

Applicant, *Wm Hill*

County, *Cherokee*

Amount, *50*

Date of warrant, *Feb 5*

Entered on record *Feb 5*

Wm Hill

Cherokee

WARRANT HANDED TO

R. J. Jones

Hill, William
Cherokee

1891

Wm Hill

Cherokee Co

1891

No *284*

Application for Allowance

FOR THE YEAR ENDING OCTOBER 31, 1891.

FOR—

Left Arm the

Applicant, *Wm Hill*

County, *Cherokee*

Amount, *50*

Date of Warrant, *Feb 11*

Entered on record *Feb 11*

Wm Hill

WARRANT HANDED TO

R. J. Jones

Cherokee

STATE OF GEORGIA,

Cherokee County.

I, *Oscar W. Putnam* Ordinary of said County, do certify that I am well acquainted with *Wm Hill* 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 *5th* day of *Feb* 189*1*.

Oscar W. Putnam

Ordinary *Cherokee* County.

STATE OF GEORGIA

FOR APPLICANTS RECEIVING ALLOWED PENSIONS

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

PERSONALLY appears *Wm Hill* 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 _____ day of _____ 1857; 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 *private* in Company *E*, of *18*th Regiment of *Georgia* Volunteers *Wofford*'s Brigade; that whilst engaged in such military service, at the battle of *Kedon Run* in the State of *Va*, on the _____ day of _____ 1864, he was wounded as follows: *By a fragment of a shell in the left arm, thereby destroying the mobility the entire elbow joint, rendering this arm of no use and making the arm thro' its length useless.*

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1890. I have heretofore been allowed a pension of *50* dollars.

Sworn to and subscribed before me, this the *11th* day of *February* 1890, *William Hill* Notary Public for Georgia.

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, *William Hill* of *Cherokee* county, in said State, do hereby appoint *Robert D. Jones* 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 *11th* day of *February* 1890.

Executed in the presence of us:

W. D. Kitchener

William Hill Notary Public for Georgia.

DIRECTION.

Send money to me as follows, by _____

to _____

County, Georgia.

P. O.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

PERSONALLY appears *Wm Hill* 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 _____ 1857; 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 *private* in Company *E*, of *18*th Regiment of *Georgia* Volunteers *Wofford*'s Brigade; that whilst engaged in such military service at the battle of *Kedon Run* in the State of *Va*, on the _____ day of _____ 1864, he was wounded as follows: *By a cannon shot wound in the left arm at the elbow rendering said arm of no use and making the arm thro' its length useless.*

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1891. I have heretofore been allowed a pension of *50* dollars, for *two years*.

Sworn to and subscribed before me, this, the *11th* day of *Feb* 1891.

Wm Hill Notary Public for Georgia.

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *11th* day of *Feb* 1891.

Executed in the presence of us:

Wm Hill Notary Public for Georgia.

William Hill Notary Public for Georgia.

DIRECTION.

Send money to me as follows, by _____

to _____

County, Georgia.

P. O.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County, }
PERSONALLY appears *William Hill*
of *Cherokee* County, State of Georgia, who, being duly sworn, says
on oath that he is a *bona fide* citizen and resident of Georgia, and has been such continuously
since the _____ day of _____ 1857; 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 *Private* in Company *H*,
of 18th Regiment of *Georgia* Volunteers *McPherson's*'s
Brigade; that whilst engaged in such military service at the battle of *Lookout Mountain*
in the State of *Tenn*, on the *24th* day of
August 1862, he was wounded as follows: *Left hand shot
in the left arm, causing the arm to be stiff, and the right hand
the arm became numb and substantially and essentially useless*

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

Eighty Dollars for 1890-1891
Sworn to and subscribed before me this the *1st* day of *March* 1892, } *William L. Hill*
O. M. Postman 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, *William Hill*
of *Cherokee* County, in said State, do hereby appoint *John Jones*
my true and lawful attorney in fact, for
me and in my name, to receive and accept 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. *William L. Hill* [L. S.]

Executed in the presence of us:

O. M. Postman *J. S. DuRoi* *U. R. R.*
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 *William Hill* 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 _____ 1857; that he enlisted in the military service of the Con-
federate States (or of the State of *Georgia*) during the war between the
States, and served as a *Private* in Company *H* of 18th Regiment
of *Georgia* Volunteers *McPherson's*'s Brigade; that whilst engaged in
such military service at the battle of *Lookout Mountain* in the State
of *Tenn*, on the _____ day of *October* 1862, he was
wounded as follows: *Left hand shot in the left arm, causing the arm to be stiff, and the right hand
the arm became numb and substantially and essentially useless*

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, 1893. I have heretofore been allowed a pension of _____

Eighty dollars, for 1890-1891-1892
Sworn to and subscribed before me, this the *1st* day of *March* 1893, } *William L. Hill*
O. M. Postman 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, *William L. Hill* Ordinary of said County,
do certify that I am well acquainted with *William Hill* the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his
said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the in-
dividual he represents himself to be, and that he resides in this County.

Further certify that *William Hill* is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the _____
day of _____ 1857; that he enlisted 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.

Given under my official signature and seal, this *1st* day of *March* 1893,
of *Cherokee* County, Georgia.

STATE OF GEORGIA,

POWER OF ATTORNEY.

POWER OF ATTORNEY.

STATE OF GEORGIA.

Cherokee COUNTY.
Know all Men by these Presents, That I, William Reid
of Cherokee
County, State of Georgia, do hereby appoint Spa Jones
of Fulton County 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 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 Attor-
ney 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 27th
day of February 1894.

Executed in the presence of us

A. L. Burn, ordinar
G. E. Baker

DIRECTIONS.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.
KNOW ALL MEN BY THESE PRESENTS, That I, William Reid
of Cherokee
County, State of Georgia, do hereby appoint R. O. Douglas
of Fulton County 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 28th
day of January 1895.

Executed in presence of us

A. L. Burn, ordinar
G. E. Baker

DIRECTIONS.

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

Hill, William
Cherokee Co
(For These Already Enrolled.)
No. 448
Soldier's Pension.
1894.
Name William Reid
County Cherokee
Disability Dis Arm
Amount, \$ 50.
2/13
1894.
W. H. HARRISON,
Secretary Executive Department.
WARRANT HANDLED TO
Spa Jones
Geo. W. Harrison, State Printer, Atlanta.
No date

Spa Jones on
Hill, William
(For These Already Enrolled.)
No. 855
SOLDIER'S PENSION.
1895.
Name William Reid
County Cherokee
Disability Arm
Amount, \$ 50.00
2/4
1895.
RICHARD JOHNSON,
Secretary Executive Department.
WARRANT HANDLED TO
Spa Jones
Geo. W. Harrison, State Printer, Atlanta.
No date

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

Cherokee County. }

PERSONALLY appears *William Nield* 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 *1854*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *A*, of *12*th Regiment of *Georgia* Volunteers *Hanfords*'s Brigade; that whilst engaged in such military service at the battle of *Godan Brook* in the State of *Virginia*, on the *12* day of *October* 1864, he was wounded as follows: *By R. B. U. H. in left 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 26, 1894. I have heretofore been allowed a pension of *Five* dollars, for the year 1893.

Sworn to and subscribed before me, this, the

30 day of *February* 1894.

A. C. Corns, Ordinary

William Nield
mark

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. C. Corns* Ordinary of said County, do certify that I am well acquainted with *William Nield* 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 *30th* day of *February* 1894.



Ordinary

A. C. Corns
Cherokee County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

Cherokee County. }

PERSONALLY appears *William Nield* 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 *1854*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *B*, of *18*th Regiment of *Georgia* Volunteers, *Hanfords*'s Brigade; that whilst engaged in such military service at the battle of *Godan Brook* in the State of *Virginia*, on the *12* day of *October* 1864, he was wounded as follows:

By R. B. U. H. in left 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 *Five* dollars, for the year 1894.

Sworn to and subscribed before me, this, the

30 day of *January* 1895.

A. C. Corns, Ordinary

William Nield
mark

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. C. Corns* Ordinary of said County, do certify that I am well acquainted with *William Nield* 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 *January* 1895.



Ordinary

A. C. Corns
Cherokee County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, William Hill hereby authorize A. C. Brown

Ordinary of Cherokee County

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 first day of July 1896.

Executed in presence of us

E. B. Wiley

[L. S.]

Audited March 28 1889.

Wm. A. Wright
COMPTROLLER-GENERAL.

Cherokee

Maimed Soldiers.

Voucher No. 1476

Amount. \$ 50.

Paid to William Hill

For Sept ann annu

March 19 1889.

Included in Warrant No. 1

issued to Treasurer.

1889.

WARRANT CLERK.

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

Warrant

Cherokee

Hill, William
Cherokee Co
ACT OF 21 OCT. 1887.
(For Those Already Enrolled.)

No. 1957

SOLDIER'S PENSION.

1896.

Cherokee 1897

Name William Hill

County Cherokee

Disability Disabled arm

Amount, \$ 50.00 Dollars

3/7 1896

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

Wm. A. Wright
Geo. W. Harrison, State Printer, Atlanta.

no data

STATE OF GEORGIA

For Applicants Heretofore Allowed Pensions.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Cherokee County.

Personally appears William Hill 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 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 Private in Company H, of the 1st Regiment of Georgia Volunteers, 2nd Brigade; that whilst engaged in such military service in the State of Va, on the 19th day of Oct 1864, he was wounded, injured or diseased as follows:
Wounded in left arm at 8169 front

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1896. I have heretofore as a resident of Cherokee county been allowed a pension of \$15.00 dollars, for the year 1895.

Sworn to and subscribed before me, this, the 19th day of Feb 1896. } William Hill
A. 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, A. C. Brown Ordinary of said County, do certify that I am well acquainted with William Hill 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 19th day of Feb 1896.



A. C. Brown
Ordinary Cherokee County.

No. 1476

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga. March 19 1889

Mr. William Hill 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

Left arm disabled He is entitled to receive the sum of \$15.00 Dollars for such disability, the same being the allowance due for the year ending October 24, 1889.

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

By the Governor

W. H. Harrison

CLERK EXECUTIVE DEPARTMENT.

50.
RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

\$15.00 Dollars,
per above voucher, this 19th day of March 1889.

Wm Hill
W. A. Mighan

Audited *18*

COMPTROLLER-GENERAL.

Cherokee

Maimed Soldiers.

Voucher No. *284*

Amount \$ *50*

Paid to *Wm Hill*

For *Left arm*

disabled

July 5 1890

Included in warrant No.

issued to Treasurer.

18

WARRANT CLERK.

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

R. J. Jones

Audited *1891.*

COMPTROLLER-GENERAL.

Cherokee

1891.

Maimed Soldiers.

Voucher No. *584*

Amount \$ *50*

Paid to *William Hill*

For *Arm disabled*

July 11 1891.

Included in warrant No.

issued to Treasurer.

1891.

WARRANT CLERK.

Geo. W. Harrison, State Printer, Atlanta.

R. J. Jones
Caution

No. 284

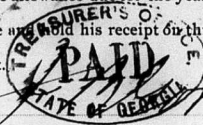
STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga., July 5 1890

Mr. William Hill 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

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

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



By the Governor,

W. H. Harrison

CLERK EXECUTIVE DEPARTMENT.

GOVERNOR.

\$ 50

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty Dollars,
per above voucher, this 5 of July 1890

Attest
Dr. William Hill

1891.

No. 584

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga., July 11 1891.

Mr. William Hill 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

Ann dis
He is entitled to receive the sum of Fifty & 00/100 Dollars
for such disability, the same being the allowance due for the year ending October 24, 1891.

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



By the Governor,

W. H. Harrison

Sec'y EXECUTIVE DEPARTMENT.

GOVERNOR.

\$ 50

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

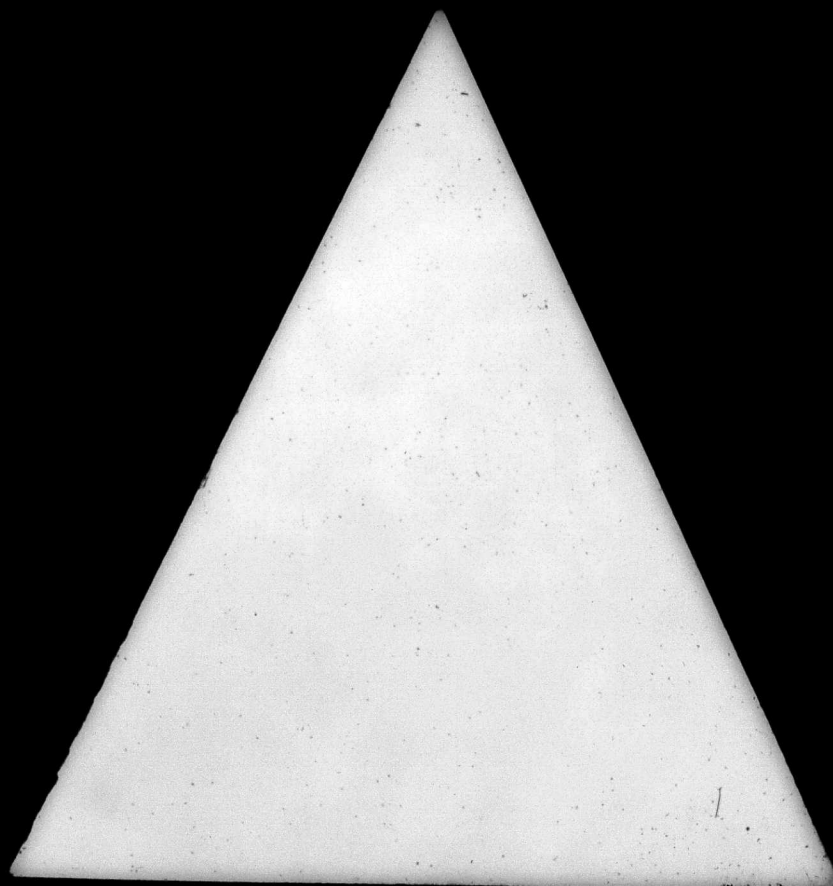
Fifty & 00/100 Dollars,
per above voucher, this 11 of July 1891.

Included in
Ch No 404
wch

Attest
Dr. William Hill

lichts

Verdammte



POWER OF ATTORNEY

STATE OF GEORGIA,

Cherokee County,

I, *J. B. Hindman*

W. D. Wright

of *Stanton County*

hereby authorize

to receive and receipt for the pension allowed and request that he remit same to *W. D. Wright*

Living at *London*

by *Chas*

Witness my hand and seal this *12th*

day of *April*, 1895.

Executed in presence of

W. D. Wright

J. B. Hindman

Cherokee

Hindman, J. B.
No. 322
Cherokee Co.

INDIGENT PENSION

1895.

Name *S. B. Hindman*

County *Cherokee*

Ground

July 1

RICHARD JOHNSON,

Secretary Executive Department

WARRANT HANDLED TO

E. H. Catty

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, *S. B. Nindman* hereby authorize

W. D. Wright of *Fulton County*

to receive and receipt for the pension allowed and request that he remit same to *S. B. Nindman*

Ordaining at *Canton* by *Chock*

Witness my hand and seal this *12th* day of *October*, 1895.

Executed in presence of

S. B. Nindman
Ordaining
W. D. Wright

S. B. Nindman
mark

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Cherokee County.

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

1. What is your name and where do you reside? (give State, County and post office). *Cherokee*
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State? *S. B. Nindman Cherokee County*
m Cherokee thirteen years
3. When and where were you born? *1824 2000.6 State of North Carolina*
4. Did you volunteer in the Confederate Army or in the Georgia Militia? *on confederate army*
5. When and where did you enlist? *January 1st, 1862 at Tallahassee, Fla*
6. In what company and regiment did you enlist? *Company 1st S. C. Regt*
7. How long did you remain in that company and regiment? *1862 1864 was taken prisoner*
8. If you were discharged from same and joined another, or if you were transferred to another, give an account of such discharge or transfer? *The early part of 1864 I was sent home stayed a short time then joined Company 42nd Regt, S. C. Regt*
9. For how long a period did you discharge regular military duty? *from Spring of 1864 till*
10. When, where and under what circumstances were you discharged from service? *at the surrender of Lee's army*
11. What is your present occupation? *not able to do any thing*
12. How much can you earn per annum by your own exertions or labor? *\$16.00 dollars*
13. What has been your occupation since 1865? *farming & work as day labor*
14. What sum would be necessary for your support for this pension year, and how much are you able to contribute thereto either in labor or income? *some \$20.00 dollars*
15. What is your present physical condition and how long have you been in such condition? *I am now and from age handicapped & feeble*
16. 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"?
17. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when, and where you lost your sight?
age & poverty & infirmity & poverty
18. What property, effects or income do you possess? *Very small amount of*
household goods
19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same? *none only the above referred to*
20. In what County did you reside during those years and what property did you then return for taxation? *in Cherokee County in 1893, I returned some land that I had*
21. How were you supported during the years 1893 and 1894? *as before I did not try to see*
did all I could & my wife did work & I had to be in the mine
22. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? *some \$20.00 dollars I was very hard*
23. What was your employment during 1893 and 1894? What pay did you receive in each year? *my wife did work & I had to be the gold mine &*
we lived very hard
24. Are you married and have you a family? If so, is your wife living and how many children have you? Give age and sex of children and their means of support? *I am married my wife*
is living no children

INDIGENT PENSION

1895.

Name *S. B. Nindman*

County *Cherokee*

Ground

Guy

RICHARD JOHNSON,

Secretary Executive Department

WARRANT HANDED TO

E. J. Galt

Geo. W. Harrison, State Printer, Atlanta.

25. Are you receiving a pension under any law of this State, if so what amount and for what disability?

none
Sworn to and subscribed before me this the
12 day of *April* 1895. } *S. B. Windman* Applicant.
male
D. L. Brown Ordinary
of *Cherokee* County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Dawson County.

John Woodall of said State and County, having been presented as a witness in support of the application of *S. B. Windman* for pension under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? *John Woodall & Reside in Dawson County Ga*
2. Are you acquainted with *S. B. Windman*, the applicant, if so how long have you known him? *Ever since June 1862*
3. Where does he reside, and how long has he been a resident of this State? *Don't know*

4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? *He was Confederate Soldier joined the 52 Regiment I was a member of the same Regiment I was in Co. F Adams of Cobb*

5. When, where and in what company and regiment did he enlist? *He enlisted of June for Towell Term Regt Co. A 52 Regt - Ga Volunteer*

6. Were you a member of the same company and regiment? *Yes of the same Regiment*

7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? *He served months with me and was good faith full soldier he was captured while in the Kentucky Raid*

8. What property, effects or income has the applicant? (Give your means of knowledge.) *I don't know*

9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same? *I don't know*

10. What is the applicant's occupation and physical condition? *don't know*

11. Is the applicant unable to support himself by labor of any sort, if so, why? *from this appearance I say he was not*

12. How was he supported during the years 1893 and 1894? *I don't know*

13. What portion of his support for these two years was derived from his own labor or income? *don't know*

14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? *I don't know only from this age and feble appearance he cant do much*

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

Sworn to and subscribed before me, this
the 15 day of *April* 1895. } *John Woodall* Witness
male Applicant.
Sworn to and subscribed before me April 15th 1895
Balcan Harbor Ordinary of Dawson Co Ga

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Cherokee County.

Personally came before me *W. D. Coleman* and *C. Pickett*, both known to me as reputable physicians of said county, who being severally sworn, say on oath that they have examined carefully *S. B. Windman*, applicant for pension under the Act of 1894, and after such personal examination, say that his precise physical condition is as follows:

We find that he is 71 years old, and that he is physically unable to do manual labor sufficient to earn a living by reason of age and infirmity.

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

Sworn to and subscribed before me, this
the 12th day of *April* 1895. } *W. D. Coleman, M.D.*
C. Pickett, M.D.

D. L. Brown, ordinary

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cherokee County.

I, *D. L. Brown*, Ordinary in and for said County, hereby certify that the applicant *S. B. Windman* resides in said County, and was a bona fide resident of this State on the first day of January, 1894, and that the witnesses, viz:

W. D. Coleman & C. Pickett are of trustworthy character and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of *Cherokee* County show that applicant returned for taxation in his name in 1893, *no property* dollars of property, and in 1894, *no property* dollars of property.

Witness my hand and seal of office, this 15th day of *April* 1895.

D. L. Brown Ordinary
of *Cherokee* County.

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, S. B. Hindman hereby authorize

Wm. A. Kiefer of Atlanta, Ga

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

Abraham ending by check

at Atlanta, Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 24

day of December 1897

S. B. Hindman [L. S.]
mark

Executed in presence of

John R. R.

Hindman, S. B.
Cherokee County, Ga.

ACT OF 14 DEC. 1894.

(For These Already Enrolled.)

No. 211

INDIGENT

Soldier's Pension.

1897.

Name S. B. Hindman

County Cherokee

Jan 9 1897.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

City

No date

Hindman, S. B.
Cherokee Co.

ACT OF 14 DEC. 1894.

(For These Already Enrolled.)

No. 208

INDIGENT

SOLDIER'S PENSION,

1898.

Name Samuel W. B. Hindman

County Cherokee

WARRANT ISSUED

1/20 1898.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

N. H. N.

W. H. HARRISON, STATE PRINTER, ATLANTA

No date

POWER OF ATTORNEY.

State of Georgia,

Cherokee County.

I, Samuel W. B. Hindman hereby authorize Wm. A. Kiefer

Receipt of Georgia

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

A. B. Kiefer by check

at Atlanta, Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 24

day of Jan 1898.

Samuel W. B. Hindman [L. S.]
mark

Executed in presence of

A. B. Kiefer

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears S. B. Windman 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 day of Dec 1872; that he is 22 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of near 4 years in Company A, of 62th Regiment of Geo. Vol.; that his physical condition is as follows: Old and Infirmer Broke down himself from age and exposure

that his property consists of the following items me, Of. and one
one horse, wagon

of the value of 20 or 25 Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1897. I have heretofore as a resident of Cherokee county been allowed a pension for the year 1896

Sworn to and subscribed before me, this, the 24th day of December 1896 } S. B. Windman
A. L. Linn Ordinary.

STATE OF GEORGIA,

Cherokee County.

I, A. L. Linn Ordinary of said County, do certify that I am well acquainted with S. B. Windman 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 December 1896



A. L. Linn
Ordinary Cherokee County.

NOTE—The blank spaces must be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears Samuel B. Windman 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 day of Dec 1872; that he is 22 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of near 4 years in Company A, of 62th Regiment of Geo. Vol.; that his physical condition is as follows: Old and Infirmer

that his property consists of the following items none

of the value of _____ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1898. I have heretofore as a resident of Cherokee county been allowed a pension for the year 1897

Sworn to and subscribed before me, this, the 24th day of Aug 1898 } Samuel B. Windman
A. L. Linn Ordinary.

State of Georgia,

Cherokee County.

I, A. L. Linn Ordinary of said County, do certify that I am well acquainted with Samuel B. Windman 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 Aug 1898



A. L. Linn
Ordinary Cherokee County.

NOTE—The blank spaces must be filled.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Charlottesville County.

I, S. B. Hindman, hereby authorize

Wm. A. Wright of Atlanta Ga

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

Albion W. Lindsey at Atlanta Ga

by check

Witness my hand and seal this 2nd day of January 1899.

Executed in presence of

Albion W. Lindsey } S. B. Hindman (L. S.)
mark

Hindman, S. B.
Charlottesville County

CODE SEC. 1284.

(For Those Already Enrolled.)

No. 1398

INDIGENT

SOLDIER'S PENSION,

1899.

Name S. B. Hindman

County Charlottesville

WARRANT ISSUED

1899

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

W. A. Wright

Geo. W. Harrison, State Printer, Atlanta.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,

Charlottesville County.

I, S. B. Hindman, hereby authorize

Wm. A. Wright of Atlanta Ga

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

Albion W. Lindsey at Atlanta Ga

by check

Witness my hand and seal, this 2nd day of Jan 1900.

Executed in presence of

Albion W. Lindsey } S. B. Hindman [L. S.]
mark

Hindman, S. B.

Charlottesville

CODE SEC. 1284.

(For Those Already Enrolled.)

No. 1887

INDIGENT

SOLDIER'S PENSION,

1900.

Name S. B. Hindman

County Charlottesville

WARRANT ISSUED

1900.

JOHN. W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W. A. Wright

Geo. W. Harrison, State Printer, Atlanta.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears L. B. Windham 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 10 day of Dec 1888; that he is 24 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 4 years in Company A, of 54th Regiment of Cal. & Co; that his physical condition is as follows: unable to work from age & infirmity

that his property consists of the following items Small amount of household furniture

of the value of ten Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1899. I have heretofore as a resident of Cherokee county been allowed a pension for the year 1898.

Sworn to and subscribed before me, this, the 10 day of January 1899. L. B. Windham Ordinary.

State of Georgia,

Cherokee County.

I, A. B. Gorman Ordinary of said County, do certify that I am well acquainted with L. B. Windham 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 10 day of January 1899.



Ordinary Cherokee County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1899.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears L. B. Windham 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 10 day of Dec 1888; that he is 24 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 4 years in Company A, of 54th Regiment of Cal. & Co; that his physical condition is as follows: He is old & his back does not work

that his property consists of the following items very small amount of house hold furniture

of the value of ten Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1900. I have heretofore as a resident of Cherokee county been allowed a pension for the year 1899.

Sworn to and subscribed before me, this, the 10 day of Jan 1900. L. B. Windham Ordinary.

State of Georgia,

Cherokee County.

I, A. B. Gorman Ordinary of said County, do certify that I am well acquainted with L. B. Windham 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 10 day of Jan 1900.



Ordinary Cherokee County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1900.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, S. B. Hindman hereby authorize
A. C. Corn of Cherokee County
 to receive and receipt for the pension allowed and request that he remit same to
me at Canton Ga
 by _____

Witness my hand and seal, this 1st day of Jan 1901.
S. B. Hindman [L. S.]
mak

Executed in presence of
A. C. Corn, Clerk

Hindman, S. B.
Cherokee Co.

CODE SECTION 124
 (For Those Already Enrolled.)

No. 3669

INDIGENT

SOLDIER'S PENSION.
 1901.

Name S. B. Hindman
 County Cherokee

WARRANT ISSUED

6/10/01 1901.
John W. Lindsey,
 Commissioner of Pensions.

WARRANT HANDED TO

A. C. Corn
 Geo. W. Harrison, State Printer, Atlanta

No data

Hindman S. B.
Cherokee Co. (Samuel B.)

CODE SECTION 124.
 (FOR THOSE ALREADY ENROLLED.)

352 No. 3619

INDIGENT

SOLDIER'S PENSION
 1902.

Name S. B. Hindman
 County Cherokee
 Co. 4 Regiment 52 Ga

WARRANT ISSUED

6/10/02 1902.
John W. Lindsey,
 Commissioner of Pensions.

WARRANT HANDED TO

Only
 Geo. W. Harrison, State Printer, Atlanta

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, S. B. Hindman hereby authorize
A. C. Corn of Canton Ga
 to receive and receipt for the pension allowed and request that he remit same to
me at Canton Ga
 by _____

Witness my hand and seal, this 9 day of Jan 1902.
S. B. Hindman [L. S.]
mak

Executed in presence of

J. D. Re

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee

County.

Personally appears S. B. Wainman 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 day of 1876; that he is 26 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States; and served for the term of 1 years in Company A, of 12th Regiment of Georgia Volunteers; that his physical condition is as follows: not able to work in the arms house of Cherokee County

that his property consists of the following items has no property

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1901. I have heretofore as a resident of Cherokee county been allowed a pension for the year 1900

Sworn to and subscribed before me, this the 1st

day of Jan 1901.

D. C. Cunn Ordinary.

STATE OF GEORGIA,

Cherokee

County.

I, D. C. Cunn Ordinary of said County, do certify that I am well acquainted with S. B. Wainman 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.

D. C. Cunn Ordinary Cherokee County.



NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1901.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee

County.

Personally appears S. B. Wainman 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 day of 1877; that he is 27 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 3 1/2 years in Company A, of 12th Regiment of Georgia Volunteers; that his physical condition is as follows: Old and feeble, kidney trouble

that his property consists of the following items

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1902. I have heretofore as a resident of Cherokee county been allowed a pension for the year 1

Sworn to and subscribed before me, this the 9

day of Jan 1902.

A. C. Cunn Ordinary.

STATE OF GEORGIA,

Cherokee

County.

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

Given under my official signature and seal, this 9

day of Jan 1902.

A. C. Cunn Ordinary Cherokee County.



NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1902.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, S. B. Hindman hereby authorize

Wm. A. Wright of Atlanta Ga.

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

A. B. Connor at Canton Ga.

by check.

Witness my hand and seal, this 3rd day of June 1903.

S. B. Hindman [L. S.]

Executed in presence of

A. B. Connor Ordery

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, S. B. Hindman hereby authorize

Wm. A. Wright of Atlanta Ga.

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

A. B. Connor at Canton Ga.

by check.

Witness my hand and seal, this 5th day of June 1904.

S. B. Hindman [L. S.]

Executed in presence of

A. B. Connor Ordery

Hindman, S. B.
Cherokee Co.

CODE SECTION 1234.
(FOR THOSE ALREADY ENROLLED.)

No. 4352

INDIGENT

SOLDIER'S PENSION
1903.

Name S. B. Hindman

County Cherokee

Co. A Regiment 52 Ga.

WARRANT ISSUED

2/16 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
C. A. Ordery

Geo. W. Harrison, State Printer, Atlanta.

No data

Hindman, S. B.,
Cherokee Co.

CODE SECTION 1234.

(FOR THOSE ALREADY ENROLLED.)

A-52 No. 5024

INDIGENT

SOLDIER'S PENSION
1904.

Name S. B. Hindman

County Cherokee

Co. A Regiment 52

Ga.

WARRANT ISSUED

7/18 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
C. A. Ordery

Geo. W. Harrison, State Printer, Atlanta.

No data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears S. B. Hindman 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 _____ day of _____ 1898; that he is 48 years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 2 years in Company 1, of 52th Regiment of Volunteers; that his physical condition is as follows: Broke down from age

that his property consists of the following items: no return

of the value of _____ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1903. I have heretofore as a resident of Cherokee county been allowed a pension for the year 1902.

Sworn to and subscribed before me, this the 3^d day of May 1903. S. B. Hindman his mk Ordinary. A. C. Burn

STATE OF GEORGIA,

Cherokee County.

I, A. C. Burn Ordinary of said County, do certify that I am well acquainted with S. B. Hindman 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 3^d day of May 1903.



A. C. Burn Ordinary Cherokee County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1908.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears S. B. Hindman 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 _____ day of _____ 1898; that he is 48 years old and by occupation a no occupation that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 3 years in Company 1, of 52th Regiment of Vol; that his physical condition is as follows: old and worn out

that his property consists of the following items: no return

of the value of _____ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of Cherokee County been allowed a pension for the year 1903.

Sworn to and subscribed before me, this the 5th day of May 1904. S. B. Hindman his mk Ordinary. A. C. Burn

STATE OF GEORGIA,

Cherokee County.

I, A. C. Burn Ordinary of said County, do certify that I am well acquainted with S. B. Hindman 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 May 1904.



A. C. Burn Ordinary Cherokee County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1904.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY.

I, A. B. Hindman hereby authorize
W. J. Webb of Cherokee Co.

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

by _____

WITNESS my hand and seal, this 3 day of Jan 1905.

A. B. Hindman [L. S.]

Executed in the presence of

J. D. Orr

CODE SECTION 1254.

(FOR THOSE ALREADY ENROLLED.)

A-52 No. 1622

INDIGENT

**SOLDIER'S PENSION
1905.**

Name S. B. Hindman
County Cherokee
Co. A Regiment 52

WARRANT ISSUED

FEB 2 1905.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, MANAGER, FOR STATE PRINTER, ATLANTA.

61900

no date

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 _____ 1903.

[L. S.]

Executed in presence of

CODE SECTION 1254.

(FOR THOSE ALREADY ENROLLED.)

A-52 No. 7739

INDIGENT

**SOLDIER'S PENSION
1905.**

Name S. B. Hindman
County Cherokee
Co. A Regiment 52
Reg- Va. Vol

WARRANT ISSUED

8/28 1904

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, MANAGER, FOR STATE PRINTER, ATLANTA.

61900 no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears A. B. Hindman 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 _____ day of _____ 1878; that he is 80 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 62 to 65 in Company A, of 52th Regiment of La. Volunteers; that his physical condition is as follows: Paralysis in left side, which
renders him unfit for labor

that his property consists of the following items: _____

of the value of _____ Dollars. I am now earning, by my labor, 00 Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of Cherokee County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the _____

3 day of January, 1905.

A. B. Hindman
make

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 A. B. Hindman the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal, this _____

day of January, 1905.

W. J. Webb
Ordinary Cherokee County.

Affix
your
seal
here

NOTE.—The blank spaces must be filled.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears S. B. Hindman 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 _____ day of _____ 1878; that he is 81 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 three years in Company A, of 52th Regiment of Georgia volunteers; that his physical condition is as follows: Age and poverty

that his property consists of the following items: _____

of the value of _____ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of Cherokee county been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the _____

3 day of August, 1905.

W. J. Webb Ordinary.

S. B. Hindman
make

STATE OF GEORGIA,

Cherokee County.

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

Given under my official signature and seal, this _____

day of August, 1905.

W. J. Webb
Ordinary Cherokee County.

Affix
your
seal
here

NOTE.—The blank spaces must be filled.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY.

I, S. B. Hindman, hereby authorize

W. 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 1st day of January, 1907.

S. B. Hindman [L. S.]

Executed in presence of

J. M. Blackwell

Hindman, S. B.
Cherokee Co
63

3780
CROSS SECTION 1264
(FOR THOSE ALREADY ENROLLED)

A-52 No. 6064

INDIGENT
SOLDIER'S PENSION
1907.

Name S. B. Hindman
County Cherokee
Co. A Regiment 52 Ga

WARRANT ISSUED

FEB 13 1907.

JOHN W. LINDSEY,
Commissioner of Pensions

WARRANT HANDED TO

Gen. W. HARRIS, STATE CAPITAL, ATLANTA.

63
no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Cherokee County.

Personally appears S. B. Hindman 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 _____ day of _____ 1878; that he is 82 years old and by occupation a none, 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 3 yrs in Company A, of 52th Regiment of Georgia Vol.; that his physical condition is as follows: Infirmity poverty and age

that his property consists of the following items: Small amount of house hold

of the value of Less 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 10th day of January 1907. S. B. Hindman mark
Ordinary.

State of Georgia,

Cherokee County.

I, W. J. Webb Ordinary of said County,

do certify that I am well acquainted with S. B. Hindman 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 10th day of January 1907.

W. J. Webb
Ordinary Cherokee County.

AMK
your
seal
here

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

AMS
your
real
estate

Ordinary Cherokee County.

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

FINANCE COMMITTEE:
E. H. THORNTON,
W. E. JENKINS,
C. M. WILEY.

INVESTIGATING COMMITTEE:
CHARLES D. PHILLIPS,
C. M. WILEY,
JOHN H. MARTIN.



Confederate Soldiers Home of Georgia

H. W. DELL, President Board of Trustees, Jefferson, Ga.
E. H. THORNTON, President Pro Tem, Atlanta, Ga.
W. H. HARRISON, Secretary. ANOS FOX, Treasurer.

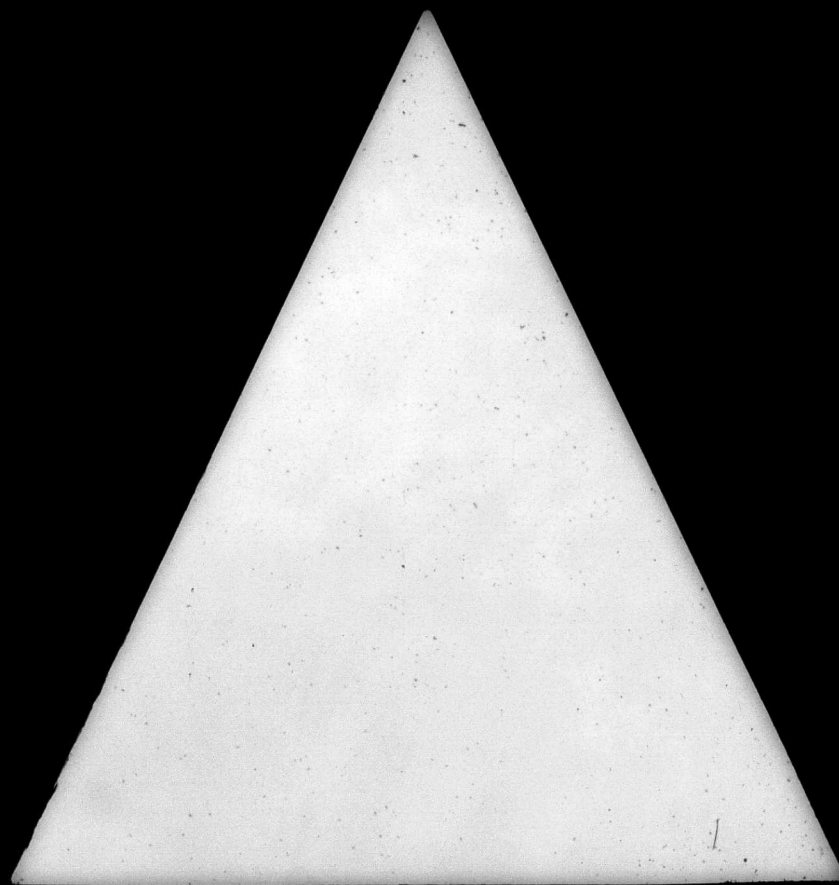
Atlanta, Ga. July 31st 1904

This is to certify that S. P. Hindman
at his own request is this day honora-
bly discharged from the Confederate
Soldiers Home of Georgia

Approved
W. S. Thompson
Vice President

J. A. Thompson
Supt.

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



Ordinary's Certificate

STATE OF GEORGIA

Cherokee COUNTY }

I, Jacob M. Lindsey Ordinary of said County, certify that I know the applicant, J. S. Hite for pension is the person he represents himself to be and resides in said county. That I also know Cherokee 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 14 day of Oct 1920

Jacob M. Lindsey Ordinary
of Cherokee County }

(SEAL)

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and witnesses in the following words: "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.

Hite, J. S.
Cherokee Co.

No. 7 Jan 1921

Confederate Soldier's Application

Under Act 1910—As Amended by Act of 1919.

County Cherokee
Name J. S. Hite
Company E
Regiment Lindley's
Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10/16-1920

Ordinary's Certificate

STATE OF GEORGIA.

Cherokee COUNTY.

I, Jacob Massey Ordinary of said County, certify that I know the applicant J. S. Hite for pension is the person he represents himself to be and resides in said county. That I also know G. H. Glass 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 14 day of Oct 1920

Jacob Massey Ordinary
of 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.

Confederate Soldier's Application

Under Act 1910—As Amended by Act of 1919.

County Cherokee
Name J. S. Hite
Company C
Regiment Franklin's
Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10/16-1920

Application for Soldier's Pension Under Act 1910

Amended by Act 1919

Questions For Applicants to Answer

STATE OF GEORGIA.

Cherokee COUNTY.

J. S. Hite of said State and County, hereby applies for the pension provided by Act of 1910, as amended by Act of 1919; to Confederate Soldiers; and submits his sworn statement, with his testimony to make out the same, and after being duly sworn true answers to make to the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? (Give County and Post-office) J. S. Hite Canton Ga
2. How long and since when have you been a continuous resident citizen of this State? All my life
3. Did you enlist in the Army of the Confederate States or in the organized militia of this State from 1861 to 1865? Yes
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) May 1863 Warren Co. Ga. Co. C. Franklin's Reg.
5. How long did you remain in the actual military service with said Company and Regiment? (Give date of discharge) May 12-1865
6. When and where was your Company and Regiment surrendered or discharged from the Service? May 17-1865 Kingston 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 _____
- a. Where was your command when you left it? Kingston Ga
- b. When did you leave the command? May 12-1865
- c. For what cause did you leave? Discharged
- 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? _____
- j. If so, when, and where? In what prison were you held and when were you released? _____
9. Are you drawing a pension of any amount from this State or the United States? No
10. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? _____

Sworn to and subscribed before me, this the

14 day of Oct 1920

Jacob Massey Ordinary
of Cherokee County.
(SEAL)

J. S. Hite

Questions for Witness as to Service

STATE OF GEORGIA,

Cherokee COUNTY. }

T. W. Glass of said State and County is hereby presented as a witness in support of the application of J. S. Hite 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? T. W. Glass
Canton, Ga.

2. How long and since when have you known J. S. Hite the applicant?
all his life

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? Canton, Ga. all his life
I know because I see him every day or two.

4. When, where and in what Company and Regiment did J. S. Hite enlist during war from 1861 to 1865? (Give date and place.) Union Co. May 1863. Co. E.

5. How did you obtain your information of this Service? I lived with him and seen him when he enlisted

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give date.) From May 1863 to May 1865

7. When and where was his command surrendered or discharged (give date and place)?
May 12-1865 Kingston Ga.

8. Were you personally present at the surrender? No

9. If not, where were you and how came you there? I was at home

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? May 12-1865 Where was his command when he left it? Kingston For what cause did he leave? Discharged

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 _____ day of _____ 1920 } T. W. Glass
his
mark

Garret Mussey Ordinary }
of Cherokee County. }

(SEAL)

day of March 1924
Jacob Massey Ordinary
of Cherokee County.
(SEAL)

made

CERTIFICATE OF ORDINARY

STATE OF GEORGIA, Cherokee Georgia.

I, Jacob Massey Ordinary of said County, do certify that I personally know Mrs. Martha Hite, the applicant, and that she is the lawful widow of J. H. Hite, and was on the indigent Pension Roll of said Cherokee County, and was paid a Pension from Cherokee County for 1924 and at the time of his death on the 15 day of August 1924, there was due to him and unpaid his Pension of Twenty five Dollars from the State of Georgia, and I know S. H. Glass, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 22 of December, 1924.

(Seal of Ordinary)

Jacob Massey Ordinary
Cherokee County

Hite, J. H.

E

of Cherokee County

1924

Application for Pension Due Deceased Soldier

(UNDER ACT 1891)

(To be paid to his Widow or Dependent Children)

BY

Mrs. Martha Hite

Widow of J. H. Hite HITE

Date of Marriage March 6 - 1867

Date of Death Aug. 15 1924

Approved and ordered paid.

JAN 3 1925

M. H. Glass

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

760 money

CERTIFICATE OF ORDINARY

STATE OF GEORGIA, Scherocsee Georgia.

I, James Massey, Ordinary of said County, do certify that I personally know Mrs. Martha Hite, the applicant, and that she is the lawful widow of J. S. Hite, and was on the indigent Pension Roll of said Scherocsee County, and was paid a Pension from Scherocsee County for 1924, and at the time of his death on the 15 day of August, 1924, there was due to him and unpaid his Pension of Twenty five Dollars from the State of Georgia, and I know S. H. Hite, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 22 of December, 1924.

(Seal of Ordinary)

James Massey, Ordinary
Scherocsee, County

Hite, J. S.

20

of Scherocsee, County

1924

Application for Pension Due
Deceased Soldier

(UNDER ACT 1891)

(To be paid to his Widow or Dependent
Children)

BY

Mrs. Martha Hite
Widow of J. S. Hite HITE

Date of Marriage March 6 - 1867

Date of Death Aug. 18 1924

Approved and ordered paid.

JAN 3

N. C. Hite

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

No money

GEORGIA, Scherocsee County

I hereby authorize and constitute L. B. Long, of said County, my lawful attorney to collect, and receipt for me in my name, for the Pension due me for 1924, through my deceased husband, J. S. Hite, who was paid Pension Roll and paid from Scherocsee County for 1924.

Witness my hand this 22 day of Dec, 1924.

Attested before me:

James Massey

James Massey
mark

Application for Pension Due Deceased Soldier

(To Be Paid to His Widow or Dependent Children)

(UNDER ACT APPROVED OCTOBER 3, 1891)

STATE OF GEORGIA, Cherokee County.

Personally before me, the Ordinary of said County, comes Mrs. Martha Hite of said County, who after being duly sworn, on oath says that she is the widow of J. S. Hite and that said Pensioner was on the Pension Roll of Cherokee County and was paid a Pension of One Hundred (\$100.00) Dollars from Cherokee County for 1924, and that the said Pensioner died in Cherokee County on the 18 day of Aug, 1924, and at the time of his death a Pension of \$ was due him from Cherokee County and unpaid for 1924. Applicant further swears that she married the said J. S. Hite on the 6 day of March, 1867, in Union 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 10 day of December, 1924

Jas. Massey Ordinary
Cherokee County
(Seal of Ordinary)

Martha Hite (L. S.)
mark

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Cherokee County.

Personally before me comes T. W. Glass, who on oath says that he knew J. S. Hite while in life and that he knows Mrs. Martha Hite, the above applicant; and knows that the said J. S. Hite and Martha Hite were in due form of law married in the County of Union in the State of Georgia on the 6 day of March, 1867, and that they were residing together as husband and wife at the time of his death on the 18 day of August, 1924, and that she is his dependent widow.

Sworn to and subscribed before me this 22 day of December, 1924.

Jas. Massey Ordinary
Cherokee County
(Seal of Ordinary)

T. W. Glass
mark

INSTRUCTIONS:

1st. This form is for widows of Service and Disabled Soldier pensioners, who died after November 1st. If pensioner died after January 1st, leaving dependent children but no widow, their guardian may use this form in their behalf.
2nd. Proof of marriage must be made, though the date marriage need not be proven, it being only necessary to prove that pensioner and widow were living together as husband and wife at the time of death.
3rd. Do not use the customary form of marriage certificate in common vogue throughout the State, suitable only for framing. Such certificate is entirely too bulky for use in any pension application. A plain certificate written on the back of the copy of marriage license is the proper thing.
4th. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the seals affixed, and that back of application, when folded, is filled in.
5th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make the payment.
6th. Return this application with your final settlement to the Pension Department.
7th. The widow or person holding her proper power-of-attorney receipt for this pension by signing name, as widow, appeals the name of husband on the application form.
8th. Only the one pension is covered by this application. If the marriage took place before 1881, take another application, on the white blank, to admit widow to roll in her own right. November 1st is the last filing date for the next year's roll.

INSTRUCTIONS:

1st. This form is for widows of Service and Disabled Soldier Pensioners, who died after November 1st. If pensioner died after January 1st, leaving dependent children but no widow, their guardian may use this form in their behalf.

2nd. Proof of marriage must be made, though the date of marriage need not be proven, it being only necessary to prove that pensioner and widow were living together as husband and wife at the time of death.

3rd. Do not use the enormous large form of marriage certificate in common vogue throughout the State, suitable only for framing. Such certificate is entirely too bulky for use in any pension application. A plain certificate written on the back of the copy of marriage license is the proper thing.

4th. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the same attested, and that back of application, when folded, is filled in.

5th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make the payment.

6th. Return this application with your final settlement to the Pension Department.

7th. The widow or person having her proper power-of-attorney receipts for this pension by signing name, as widow, opposite the name of husband on the soldier pay roll.

8th. Only the one pension is covered by this application. If the marriage took place before 1861, take another application, on the white blank, to adult widow to roll in her own right. November 1st is the last filing date for the next year's rolls.

Hite, J. S.

For **CHEROKEE** County

1925

**Application for Pension
Due Deceased Pensioner**

(UNDER ACT 1919)

(To pay expenses of last illness and funeral)

Frank P. Burt Ordinary

For **J. S. HITE**

Date of Death **AUGUST 15TH, 1924**

Amount \$ **110.50** ~~100.00~~

Approved and ordered paid

John W. Clark 1925
N. E. HARRIS,
Commissioner of Pensions.

Widow's Pencil #55.00 in full

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

R. T. JONES, President P. W. JONES, Gen. Manager

JONES MERCANTILE COMPANY

ESTABLISHED 1878 INCORPORATED 1897
CAPITAL, SURPLUS AND PROFITS MORE THAN \$1,000,000.00
(OWNERS: CANTON FERTILIZER COMPANY)

DEPARTMENT STORE,
MERCHANDISE, COTTON,
AND FERTILIZERS

STORE BUILDING
FLOOR SPACE OVER 48,000 Sq. Ft.

WAREHOUSE FLOOR SPACE 32,000 Sq. Ft.

REFERENCES:
BROADSTREET'S AGENCY
ANY BANK OR BUSINESS
CONCERN WHO KNOW US

CANTON, GA. Aug. 20th 1925.

Sold to W. E. Hite for Funeral Expense Mr J.S.Hite,

TERMS

To Casket, Burial Suit, and Service *Verse* - \$ 110.50

GEORGIA-CHEROKEE COUNTY:

THE ABOVE AND FOREGOING ACCOUNT IS RENDERED FOR
FUNERAL EXPENSES OF J.S.HITE, WHO DIED WITHOUT
OWNING SUFFICIENT PROPERTY TO PAY THIS BILL.

W. E. Hite

SWORN TO AND SUBSCRIBED BEFORE ME,
THIS THE 8TH DAY OF MAY 1926.
Frank P. Burt ORDINARY.



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 **W. E. NITE** of said County, who, after being sworn, on oath says that he knew **J. S. NITE** of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in **CHEROKEE** County, in this State, on the **18TH** day of **AUGUST** 192⁴, and that a Pension of **ONE HUNDRED** (\$ **100.00**) Dollars was due pensioner and unpaid at the time of pensioner's death, and that pensioner left **A** widow ~~ANNA ANN NITE~~ surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$ **110.50** per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me

this **EIGHTH** day of **MAY** 192⁶.
Frank P. Burtz, Ordinary
CHEROKEE County
(Seal of Ordinary)

W. E. Nite

CERTIFICATE OF ORDINARY

GEORGIA, **CHEROKEE** County.

I, **FRANK P. BURTZ**, Ordinary of said County, do certify that I personally know **W. E. NITE**, who is a resident citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also knew **J. S. NITE** 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 **ONE HUNDRED** (\$ **100.00**) Dollars in said County for 192⁴, and I now believe said pensioner to be dead; and that the instructions at the foot of this voucher have been carefully observed in making up this voucher and the bills which are attached hereto.

Given under my hand and official seal, this **EIGHTH** day of **MAY** 192⁶.

(Seal or Ordinary)

Frank P. Burtz, Ordinary
CHEROKEE County

INSTRUCTIONS:

- 1st. For use in all cases where pensioner died after January 1st, had not been out of State longer than twelve months, and did not leave sufficient property to pay such expenses. THE WIDOW OF A SOLDIER, IF SHE IS LIVING, HAS PRIOR CLAIM OVER THESE EXPENSES, AND MUST MAKE APPLICATION ON YELLOW BLANK.
- 2d. 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 such date.
- 3d. Running accounts cannot be paid—only those connected with the last illness, just before death when pensioner grew worse to die.
- 4th. Such account must be sworn to before the Ordinary, and in the following form: (Do not use the terms: "just, true, due, unpaid," etc.)
"The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of _____ who died without leaving sufficient property to pay this bill."
- 5th. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed as indicated.
- 6th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.
- 7th. The Ordinary signs pay roll, as Ordinary, for the pension and then disburses the money himself and takes receipts.
- 8th. Accept no bills for nursing until you write the Pension Department, stating the circumstances in very great detail. Pensioner's children, or child-in-law, must not charge the State for doing only what the law and common humanity demand of them.
- 9th. Return this application, and attached bills, with your final settlement, to the Pension Department.
- 10th. Ordinary should see that the back of this blank, when folded, is filled out.

5th. 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.

6th. 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.

7th. The Ordinary signs pay roll, as Ordinary, for the pensioner and then disburses the money himself and takes receipts.

8th. Accept no bills for nursing until you write the Pension Department, stating the circumstances in very great detail. Pensioner's children, or children-in-law, must not charge the State for doing only what the law and common humanity demand of them.

9th. Return this application, and attached bills, with your final settlement, to the Pension Department.

10th. Ordinary should see that the back of this blank, when folded, is filled out.

Martha Kite
Cherokee County

WIDOW'S APPLICATION

To Be Put on Roll in Her Own Right
 When Husband Was on the Pension
 Roll of Georgia

County *Cherokee*
 Name *Martha Kite*
 Widow of *J. S. Kite*
 Company *and*
 Regiment *E. Hindley*
 Date of Husband's Death *Aug 18* 19 *24*
 Date of Marriage *Mar 6* 18 *67*
 Approved _____

John McCrregor
 C. E. McCRREGOR
 Commissioner of Pensions.

6 July 25

3-11/1925

Ordinary's Certificate

STATE OF GEORGIA,
Cherokee COUNTY.

I, *Frank McCreary*, Ordinary of said County, certify that I know
Martha Kite the applicant for pension; that he is the person he repre-
 sents himself to be, and that he has been continuously a bona fide resident citizen of said State since
 January 1st, 1890; that I also know *J. H. Stead* the witness as to
 marriage, and that both the foregoing were duly sworn by me before signing the respective affidavits,
 and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this *22* day of *December* 19 *24*
Frank McCreary Ordinary
 (SEAL OF ORDINARY.) of *Cherokee* County

Instructions:

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words:
 "I, the Ordinary, do hereby swear that you and the witness you have named shall give true and correct answers to all 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 space are sufficient.
3. All affidavits must be made before the Ordinary of the county of residence.
4. Affidavits must be made before the Ordinary of the county of residence.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—because Disabled Pensioners make no proof of service and were not required to do so.

APPLICATION FOR PENSION BY A WIDOW

Whose Deceased Husband Was on the Pension Roll of Georgia. (Note to be Used by the Widow of a Disabled Soldier Pensioner)

STATE OF GEORGIA

COUNTY

WIDOW'S APPLICATION

To Be Put on Roll in Her Own Right
When Husband Was on the Pension
Roll of Georgia

County Cherokee
Name Martha Hite
Widow of J. H. Hite
Company and
Regiment E. Hindley
Date of Husband's Death Aug 19 1924
Date of Marriage Mar 2 1867
Approved _____

John W. Blank
P. M. Recorder
Recorder of Pension
July 2 1925
3-11/1925

Ordinary's Certificate

STATE OF GEORGIA,

Cherokee COUNTY.

I, Isaac Massey, Ordinary of said County, certify that I know
Martha Hite the applicant for pension; that he is the person he represents himself to be, and that he has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also know J. H. Hite, the witness as to marriage, and that both the foregoing were duly sworn by me before signing the respective affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 22 day of December 19 24

(SEAL OF ORDINARY.)

Isaac 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 give shall be the whole truth. So help you God."
2. Additional affidavits may be attached if blank space are sufficient.
3. All affidavits must be made before the Ordinary of the County of residence.
4. Only widows who are married prior to first January, 1861, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—because Disabled Pensioners made no proof of service and were not required to do so.

APPLICATION FOR PENSION BY A WIDOW

Whose Deceased Husband Was on the Pension Roll of Georgia. (Not to be Used by the Widow of a Disabled Soldier Pensioner.)

STATE OF GEORGIA,

Cherokee

COUNTY.

Personally before me comes Martha Hite of said County, who, after having been duly sworn, says that she is the widow of J. S. Hite to whom, in the County of Cherokee State of Georgia she was married on the 6 day of March 1867, and that she remained his wife, and resided with him to the date of his death in Aug. 1924 and that she has not since his death remarried; at the time of his death he was a resident of Cherokee County, in said State of Georgia, and he was on the indigent Pension Roll of the State and paid a pension of \$1.00 in Cherokee County for 1924 (per annum), on account of being a soldier in Company _____ Regiment _____ (Volunteers or State Militia).

That she is now a bona fide resident citizen of said State of Georgia, and she has, continuously, resided there since at any time day of _____ 19____.

Sworn to and subscribed before me, this the

30 day of Dec, 1924 }
Jacob Massey, Ordinary }
 of Cherokee County }

Martha Hite }
mark } Applicant.

(SEAL OF ORDINARY.)

Affidavit of Witness to Prove Marriage and Date of Death of Husband.

STATE OF GEORGIA,

Cherokee

COUNTY.

Personally before me comes T. H. Glass known to be a responsible and truthful person, residing in said County, who after having been duly sworn, says that of deponent's own personal knowledge, Mrs. Martha Hite, who made the foregoing affidavit, is the lawful widow of J. S. Hite who died in Cherokee County in said State of Ga. on the 15 day of Aug. 1924, and that she has not since married; that she became the wife of J. S. Hite on the 6 day of March, 1867; that she and he had resided together as husband and wife, continuously, since 6 day of March 1924, and that J. S. Hite was the same man who was on the pension roll of said State of Georgia from Cherokee County _____ when he died.

Sworn to and subscribed before me, this the

12 day of December, 1924 }
Jacob Massey, Ordinary }
 of Cherokee County }

T. H. Glass }
mark }

(SEAL OF ORDINARY.)

of Delaware County } Ordinary

(SEAL OF ORDINARY.)

mark

POWER OF ATTORNEY.

STATE OF GEORGIA, }

Cherokee County, }

Know all Men by these Presents, That I, Paul A. Hill
of Cherokee County,

County, in said State, do hereby appoint Wm. B. DeLoach
of Cherokee County, 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 April, 1891.

Executed in the presence of us:

[L. S.]

N. C. HillWm. B. DeLoach

DIRECTOR.

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



With James A. Hill
Cherokee County

a43 1891.

No. 6449

Widows' Pension

— PAID TO —

Mrs. James A. Hill

— 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, *James A. Hitt*

of *Lawrence*

County, in said State, do hereby appoint *Wm. B. Williams* of *Lawrence*, *Cherokee* County, *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 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 *April*, 189*1*.

Executed in the presence of us:

R. E. Sullivan
O. M. Williams

DIRECTIONS.

If allowed, send amount by _____ to me at _____, 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. *James A. Hitt*, who being sworn according to law, says under oath that she is the widow of *Daniel M. Hitt*, who was a soldier in

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

48th Regiment of *Ga.* Volunteers; that he enlisted in said

service on or about the *10th* day of *March*, 186*2*, and was in the

Army up to *3rd* day of *July*, 186*2*. That while in the

Army, he was on the *8th* day of *July*, 186*2*. (See Note No. 1)

He died with Breasts fever in the Hospital in Atlanta, Ga., and
deponent was with her since his death for several days attending
on him and that he died on 8th day of July, 1862.

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 *9th* day of *November*, 185*3*, and that she has resided in Georgia continuously since the day of _____, 185*7*; 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

11th day of *April*, 189*1*.

O. M. Williams

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

James A. Hitt

Cherokee COUNTY.

\$100.00.

Warrant Issued

AND HANDED TO

1891

Geo. W. Harrison, State Printer, Atlanta.

Affidavit for Three Witnesses.

Form No. 2.

STATE OF GEORGIA,

County of Cherokee

W. M. Mullins

and Joseph O. Hearn

Mrs. Jane A. Hitt

State of Georgia, is the widow of Devick M. Hitt

Company A of the 43 Regiment of Inf Volunteers.

That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or

about the 10 day of March 1862. That while in said service, or by

reason of said service in the Army, he lost his life as follows: that on or about the

day of June 1862 Devick M. Hitt was taken sick with

fever while in the army in Tennessee that he was sent

off from the army to the Hospital that three or four

weeks of his death while in the Hospital in Atlanta he

they dependent know that he was sent off sick and

know that he never returned to his company after

that time that they believe that said soldier died

on or about the 8 day of July 1862

One of Dependent B. C. Hitt advised in the burial of

said Devick M. Hitt that he was buried in or about

the 12 day of July 1862 that his remains were buried

at a burying ground in Cherokee County, Ga.

One of Dependent William M. Mullins was Commanding

the Company to which said Devick M. Hitt belonged that

he was officially notified of the death of said Hitt and

that on said notice he struck the name of Devick Hitt

from the Muster roll of said company

from the Muster roll of said company

from the Muster roll of said company

from the Muster roll of said company

from the Muster roll of said company

from the Muster roll of said company

from the Muster roll of said company

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from the Muster roll of said company

from the Muster roll of said company

from the Muster roll of said company

from the Muster roll of said company

from the Muster roll of said company

We further swear that Mrs. Jane A. Hitt 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. B. C. Hitt

Sworn to and subscribed before me, this, the

11th day of April 1891.

Oscar W. Putnam

Ordinary.

William M. Mullins

Joseph O. Hearn

from the Muster roll of said company

from the Muster roll of said company

from the Muster roll of said company

from the Muster roll of said company

from the Muster roll of said company

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

Form No. 3.

STATE OF GEORGIA,

County of Cherokee

I, Oscar W. Putnam

Ordinary

in and for said County of Cherokee

State of Georgia, hereby certify that I am acquainted with Mrs. Jane A. Hitt

the applicant for a pension in this case, and know, from my own knowledge, or from positive proof

presented to me by reputable witnesses, that she resides in this County, and that she resided in the

State of Georgia on December 23d, 1890, and has not lived out of the State since that date. I also

certify that the witnesses whose testimony she presents to sustain her claim are known to me to be

truthful witnesses, entitled to full faith and credit as such. I am fully satisfied that this claim is made in

good faith, and that I have caused the applicant and the witnesses to read or hear read the proofs they sign.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the

11th day of April 1891.



Oscar W. 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 L. Kern Ordinary in and for said County of Cherokee State of Georgia, hereby certify that I am acquainted with Mrs. Jane D. Witt 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 M. Witt 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 21st day of January, 1893.

Allen L. Kern Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, Cherokee County.

KNOW ALL MEN BY THESE PRESENTS, That I, Jane D. Witt of Benton Cherokee County Ga. County, in said State, do hereby appoint William H. Harrison of the City of Atlanta Fulton County 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 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 26th day of January, 1893.

Executed in the presence of us:

Allen L. Kern Jane D. Witt [L. S.]
Allen L. Kern Ordinary mark

DIRECTIONS.

Send amount by Bank check to me at Benton Cherokee County Ga. and oblige Jane D. Witt

Widow's Pension,
for year ending February 15th, 1893.
— PAID TO —
Mrs. Jane D. Witt
— OF —
Benton Cherokee County.
Warrant Issued
M. 10
1893
AND HANDLED TO
Geo. W. Harrison, State Printer, Atlanta.

1893.
210. 606
H. H. Jan. 21.
Cherokee County
FOR THOSE HERETOFORE PAID.

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

Form No. 2.

STATE OF GEORGIA, County of Cherokee

I, Allen L. Kern Ordinary in and for said County of Cherokee State of Georgia, hereby certify that I am acquainted with Mrs. Jane D. Witt 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 M. Witt 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 Thirtieth day of January, 1894.

Allen L. Kern Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, Cherokee County.

KNOW ALL MEN BY THESE PRESENTS, That I, Jane D. Witt of Cherokee County in said State, do hereby appoint William H. Harrison of the City of Atlanta 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 thirtieth day of January, 1894.

Executed in the presence of us:

Allen L. Kern Jane D. Witt [L. S.]
Allen L. Kern Ordinary mark

DIRECTIONS.

Send amount by check to Allen L. Kern Ordinary to me at Benton Ga. and oblige Jane D. Witt

Widow's Pension,
for year ending February 15th, 1894.
— PAID TO —
Mrs. Jane D. Witt
— OF —
Cherokee County.
WARRANT ISSUED
M. 10
1894
AND HANDLED TO
Geo. W. Harrison, State Printer, Atlanta.

1894.
210. 606
H. H. Jan. 21.
Cherokee County
FOR THOSE HERETOFORE PAID.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of *Cherokee*

Personally comes Mrs.

Jane D. Witt

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* 1831 That she is the Widow of*David M. Witt*

who was a Soldier in Company

A of the *43*Regiment of *Georgia*Volunteers, that he enlisted in said Regiment on or about the month of *March*1862 and served in the Army up to *July* 1862 That he lost hislife on the *8th* day of *July* 1862 (State here

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

Said Husband died in a Hospital in the City of Atlanta Ga. Died with Brain Fever

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 18____; 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

26th day of *January* 1893.*Allen B. Conn* Ordinary.Post-office *Canton (Ga.)*

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of *Cherokee*

Personally comes Mrs.

Jane D. Witt

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* 1831 That she is the Widow of*David M. Witt*

who was a Soldier in Company

A of the *43rd*Regiment of *Georgia*Volunteers, that he enlisted in said Regiment on or about the month of *March*1862 and served in the Army up to *July* 1862 That he lost hislife on the *8th* day of *July* 1862 (State here

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

Said Husband died in Hospital in the City of Atlanta Ga. on the 8th day of July 1862 died with fever

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 1831; 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

26th day of *January* 1894.*Allen B. Conn* Ordinary.Post-office *Canton (Ga.)*