

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, R. M. Hunt hereby authorize

Wm. A. Wright of Atlanta Ga
to receive and receipt for the pension allowed and request that he remit same to A. L. Lamm

Chattanooga at Canton Ga by Cherokee

Witness my hand and seal this 17th day of January 1897.

Executed in presence of

A. L. Lamm } R. M. Hunt

Hunt, Robert M.
Cherokee County
No. 2084

INDIGENT PENSION

1897.

Name R. M. Hunt

County Cherokee

Approved 7/1 1897.

WARRANT HANDED TO

W.A.

W. A. LAMM, DEPUTY REGISTER, ATLANTA.

1/18 97

Questions for Applicant.

STATE OF GEORGIA,

Cherokee County.

Robert M. Hunt 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) Robert M. Hunt Kelpin Ga, Cherokee Co. Ga.
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State? Cherokee County, Resided in State 53 yrs.
3. When and where were you born? In year 1844 in Cherokee Co, Ga.
4. When and where and in what company and regiment did you enlist or serve May 1862 at Chattanooga, Company B. 43rd Regt.
5. How long did you remain in such company and regiment? About 2 yrs. Till Surrender in 1865.
6. For how long a period did you discharge regular military duty? About 3 yrs.
7. When, where and under what circumstances where you discharged from service? Discharged at Surrender in 1865.
8. What is your present occupation? Farming.
9. How much can you earn (gross) per annum by your own exertions or labor? Nothing
10. What has been your occupation since 1865? Farming.
11. Upon which of the following grounds do you base your application for pension, viz.: first "age and poverty," second "infirmary and poverty" or third "blindness and poverty"? Infirmary & Poverty.
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight? Has chronic Bronchitis for years. Rt. Shoulder badly crippled. Collar Bone & Shoulder joint so injured so that it is almost useless.
13. What property, effects or income do you possess and its gross value? Cow and Hog, worth 20 dollars
14. What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, if any, did you make of same? Mare Wagon, Household & Kitchen Furniture to value of 100 dollars, and his mare died and had to sell the Remains for support.
15. In what County did you reside during those years and what property did you then return for taxation? Cherokee County. Returned about 100 dollars worth of property.
16. How were you supported during the years 1895 and 1896? In 1895 I lived off of my own labor and my family's. In 1896 my neighbors helped to make my exp.
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? About 60 dollars a year. None by my own labor.
18. What was your employment during 1895 and 1896? What pay did you receive in each year? Farming. None from own work.
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? I have a wife. I have no homestead.

20. Are you receiving any pension, if so what amount and for what disability?

none

Sworn to and subscribed before me this the

11 day of January 1897.

Allen C. Lamm Ordinary.

of Cherokee County.

Applicant.

Every Question MUST be Answered.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA.

Cherokee County.

J. W. Edwards, of said State and County, having been presented as a witness in support of the application of Robert M. Hunt 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? In Cherokee county
2. Are you acquainted with Robert M. Hunt, the applicant, is of how long have you known him? Since May 1862
3. Where does he reside, and how long has he been a resident of this State? In Cherokee county Ga where he has resided ever since I knew him 1862
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? He served in the confederal army in Co B 43rd Ga Reg
5. When, where and in what company and regiment did he enlist? He enlisted in May 1862 in Co B 43 Ga Reg
6. Were you a member of the same company and regiment? I was
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 did duty as a soldier for 3 years except when sick or on furlough
8. What property, effects or income has the applicant? (Give your means of knowledge.) He has one cow and pig. Is the value of twenty five dollars
9. What property, effects or income did the applicant possess in 1895 and 1896, and what disposition, if any did he make of same? Has one cow & household goods to value of fifty dollars. made no disposition has same as in 1895
10. What is the applicant's occupation and physical condition? A farmer his physical condition very weak cant use one of his arms to labor
11. Is the applicant unable to support himself by labor of any sort, if so, why? He cant support himself on account of being unable to use his right arm
12. How was he supported during the years 1895 and 1896? Supported by labor of himself and family
13. What portion of his support for these two years was derived from his own labor or income? Earned about one half of his support himself
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? He is unable to labor on account of his right arm being useless. He was weak at the time of the war and has been growing weaker ever since
15. What interest have you in the recovery of a pension by this applicant? I have none

Sworn to and subscribed before me, this 11 day of January 1897. J. W. Edwards Witness.
A. L. Gorman Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA.

Cherokee County.

Personally came before me Will L. Deau and Jno F. Freeman, both known to me as reputable physicians of said county, who being severally sworn, say on oath that they have examined carefully Robert M. Hunt, applicant for pension under the Act of 1894, and after

such personal examination say that his precise physical condition is as follows:

Appearance very weak & feeble. Has Chronic Bursitis for years. Crutches very badly. Right Shoulder badly crippled from a fall. Collar bone & shoulder joint so injured that it is almost useless. Cant raise it from his side without doing so with the other hand. Rendering him unable to do almost anything of work.

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 interest in said pension being allowed.

Sworn to and subscribed before me, this 11th day of January 1897. Will L. Deau, M.D. John F. Freeman, M.D. Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Cherokee County.

I, A. L. Gorman, Ordinary in and for said County, hereby certify that the applicant Robert M. Hunt 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: Will L. Deau, M.D. John F. Freeman, M.D. W. Edwards Joel L. Sargent 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 was signed.

I further certify that the tax digests of Cherokee County show that applicant returned for taxation in his name in 1895, one hundred & three dollars of property, and in 1896, two & eight dollars of property.

In my opinion the foregoing claim is made in good faith. Witness my hand and seal of office, this 11th day of January 1897. A. L. Gorman 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." Additional affidavits may be attached if blank spaces are insufficient.

Sworn to and subscribed before me. This Jan. 14 1897. J. C. Gorman, Ordinary.

Questions 8, 9, 12 and 13. answered by Isaac S. Sargent.

POWER OF ATTORNEY.

State of Georgia,
Charlottesville County.

I, R. M. Hunt hereby authorize W. W. Benson
 of Woodstock Ga.

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 10th
 day of Jan'y 1898.

R. M. Hunt [L. S.]

Executed in presence of

A. C. Benson

POWER OF ATTORNEY.

STATE OF GEORGIA,
Charlottesville County.

I, Robt. M. Hunt hereby authorize
W. W. Benson of Woodstock Ga.

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

Witness my hand and seal this 5th day of January 1899.

Executed in presence of

A. C. Benson } Robt. M. Hunt (L. S.)
mine

Hunt, R. M.
Charlottesville Ga.
 (For Those Already Enrolled.)

NO. 14574

INDIGENT

SOLDIER'S PENSION,
 1898.

Name R. M. Hunt
 County Charlottesville

WARRANT ISSUED

120 1898.

RICHARD JOHNSON,
 Commissioner of Pensions.

WARRANT HANDED TO
W. W. Benson
 GEO. W. HARRISON, STATE PRINTER, ATLANTA

No data

Hunt, Robert M.
Charlottesville County

CODE SEC. 1284.

(For Those Already Enrolled.)

No. 3334

INDIGENT

SOLDIER'S PENSION,
 1899.

Name Robt. M. Hunt
 County Charlottesville

WARRANT ISSUED
126 1899

RICHARD JOHNSON,
 Commissioner of Pensions.

WARRANT HANDED TO
W. W. B.

GEO. W. HARRISON, STATE PRINTER, ATLANTA

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears R. M. Hunt 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 24th day of April 1844; that he is 54 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 years in Company B, of 48 th Regiment of Cal. Vol.; that his physical condition is as follows: Right Shoulder crushed, which caused that arm to be of no service and have trouble of chest and long feeble breathing

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

of the value of \$200.00 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 10th day of Jan 1898. A. C. Curre Ordinary.

State of Georgia,

Cherokee County.

I, A. C. Curre Ordinary of said County, do certify that I am well acquainted with R. M. Hunt 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 Jan 1898.



A. C. Curre Ordinary Cherokee County.

NOTE.—The blank spaces must be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears Robt. M. Hunt 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 24 day of April 1844; that he is 54 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 three years in Company B, of 48 th Regiment of Cal. Vol.; that his physical condition is as follows: Have long trouble & a cough, can't sleep at night

that his property consists of the following items one cow & eggs and a small amount of household furniture

of the value of thirty \$ 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 8th day of Jan 1899. Robt. M. Hunt Ordinary.

State of Georgia,

Cherokee County.

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

Given under my official signature and seal, this 5th day of Jan 1899.



A. C. Curre Ordinary Cherokee County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, R. M. Hunt hereby authorize

H. C. Curran of Madison Co.

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

me at Madison Co.

by check

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

R. M. Hunt [L. S.]

Executed in presence of

H. C. Curran

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, R. M. Hunt hereby authorize

H. C. Curran of Cherokee County

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

me at Madison Co.

by _____

Witness my hand and seal, this 2nd day of Jan 1901.

R. M. Hunt [L. S.]

Executed in presence of

H. C. Curran

Hunt, R. M.
Cherokee
CODE SEC. 124.
(For Those Already Enrolled.)
NO. 1779
INDIGENT
SOLDIER'S PENSION,
1900.
Name R. M. Hunt
County Cherokee
WARRANT ISSUED
January 24 1900.
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDED TO
H. C. Curran
John W. Lindsey, State Printer, Atlanta.
No data

Hunt, R. M.
Cherokee
CODE SECTION 124
(For Those Already Enrolled.)
No. 1779
INDIGENT
SOLDIER'S PENSION.
1901.
Name R. M. Hunt
County Cherokee
WARRANT ISSUED
2/12 1901.
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDED TO
Curran
John W. Lindsey, State Printer, Atlanta.
No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears R. M. Davis 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 _____ 1844; that he is 66 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 three years in Company B, of 48th Regiment of GA Inf; that his physical condition is as follows: is not able to labor has lung trouble

that his property consists of the following items very small amount of household goods

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

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

Sworn to and subscribed before me, this, the 10th day of Jan 1900. R. M. Davis Ordinary.

State of Georgia,

Cherokee County.

I, A. C. Burr Ordinary of said County, do certify that I am well acquainted with R. M. Davis 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 Jan 1900.



Ordinary Cherokee County.

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears R. M. Davis 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 April 1844; that he is 66 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 years in Company B, of 48th Regiment of GA volunteers; that his physical condition is as follows: not able to labor has lung trouble

that his property consists of the following items household furniture & some stock

of the value of fifty 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 1890

Sworn to and subscribed before me, this the 10th day of Jan 1901. R. M. Davis Ordinary.

STATE OF GEORGIA,

Cherokee County.

I, A. C. Burr Ordinary of said County, do certify that I am well acquainted with R. M. Davis 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 Jan 1901.



Ordinary Cherokee County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, R. M. Hunt hereby authorize

A. L. Gann 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 10 day of Jan 1902.

Reb 16 1902 [L. S.]

Executed in presence of

J. S. Du Pre

CODE SECTION 124.
(FOR THOSE ALREADY ENROLLED.)

No. 8621

INDIGENT

SOLDIER'S PENSION
1902.

Name R. M. Hunt

County Cherokee

Co. B Regiment 43 94

WARRANT ISSUED

2/4 1902

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Q. Y.
Geo. W. Harrison, State Printer, Atlanta.

No date

Hunt, R. M.
Cherokee Co.

CODE SECTION 124.
(FOR THOSE ALREADY ENROLLED.)

No. 6049

INDIGENT

SOLDIER'S PENSION
1907.

Name R. M. Hunt

County Cherokee

Co. B Regiment 43 94

WARRANT ISSUED

FEB 13 1907.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

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

No date

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, R. M. Hunt hereby authorize

W. J. Melt of Canton

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

me at Hemphill Co. 28

by _____

Witness my hand and seal, this 17 day of Jan 1907.

R. M. Hunt [L. S.]

Executed in presence of

F. M. Blackwell

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears R. M. Hunt 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 24 day of April 1844; that he is 59 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 yr in Company B, of 42 th Regiment of Ga Volunteers; that his physical condition is as follows: cribbled from broken shoulder

that his property consists of the following items:

Arms and a little other personal property of the value of 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 1902. I have heretofore as a resident of Cherokee county been allowed a pension for the year 1901

Sworn to and subscribed before me, this the 10 day of Jan 1902.

A. C. Carr Ordinary.

STATE OF GEORGIA,

Cherokee County.

I, A. C. Carr Ordinary of said County, do certify that I am well acquainted with R. M. Hunt 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 1902.

Ordinary Cherokee County.



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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Cherokee County.

Personally appears R. M. Hunt 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 _____ 1844; that he is 64 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served for the term of 3 yrs in Company B, of 43 th Regiment of Ga Volunteers; that his physical condition is as follows: cribbled from broken shoulder

that his property consists of the following items: Household

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

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1907. I have heretofore, as a resident of Cherokee County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the 17 day of Jan 1907.

R. M. Hunt Ordinary.

State of Georgia,

Cherokee County.

I, W. J. Webb Ordinary of said County, do certify that I am well acquainted with R. M. Hunt 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 17 day of Jan 1907.

Ordinary Cherokee County.



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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, R. M. Hunt hereby authorize

Wm. S. Wright of Atlanta Ga.
to receive and receipt for the pension allowed and request that he remit same to
S. C. Carson, Esq. at Lawrence Ga.
by check

Witness my hand and seal, this 4th day of January, 1903.

Executed in presence of

R. M. Hunt
Wm. S. Wright

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, R. M. Hunt hereby authorize

Wm. S. Wright of Atlanta Ga.
to receive and receipt for the pension allowed and request that he remit same to
S. C. Carson, Esq. at Lawrence Ga.
by check

Witness my hand and seal, this 6th day of January, 1904.

Executed in presence of

R. M. Hunt
Wm. S. Wright

Hunt, R. M.
Cherokee Co.,
CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 3354

INDIGENT

**SOLDIER'S PENSION
1903.**

Name R. M. Hunt

County Cherokee

Co. B Regiment 48th Va.

WARRANT ISSUED

2/16 1903.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

(R. M. Hunt)

Geo. W. Harrison, State Printer, Atlanta.

no data

Hunt, R. M.
Cherokee Co.,
CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 5029

INDIGENT

**SOLDIER'S PENSION
1904.**

Name R. M. Hunt

County Cherokee

Co. B Regiment 48th Va.

WARRANT ISSUED

2/18 1904.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

City

Geo. W. Harrison, State Printer, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears R. M. Hunt 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 April 1844; that he is 61 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 years in Company B, of 43 th Regiment of Ca; that his physical condition is as follows: Very feeble not able to work

that his property consists of the following items: House hold furniture
one old mule & cow

of the value of \$40 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 1892

Sworn to and subscribed before me, this the 7 day of May 1903, } R. M. Hunt
N. C. Brown Ordinary.

STATE OF GEORGIA,

Cherokee County.

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

Given under my official signature and seal, this 7 day of May 1903,

N. C. Brown Ordinary Cherokee County.



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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears R. M. Hunt 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 April 1844; that he is 60 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 years in Company B, of 43 th Regiment of Ca; that his physical condition is as follows: not able to work very feeble

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

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.

Depouent 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 1893

Sworn to and subscribed before me, this the 6 day of May 1904, } R. M. Hunt
N. C. Brown Ordinary.

STATE OF GEORGIA,

Cherokee County.

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

Given under my official signature and seal, this 6 day of May 1904,

N. C. Brown 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, R. M. Hunt 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 16 day of Jan 1905.

R. M. Hunt [L. S.]

Executed in the presence of

W. J. Webb

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY.

I, R. M. Hunt hereby authorize
W. J. Webb of Cherokee
 to receive and receipt for the pension allowed, and request that he remit same to
 _____ at _____
 by _____

WITNESS my hand and seal, this 16 day of Jan 1905.

R. M. Hunt [L. S.]

Executed in the presence of

W. J. Webb

Hunt, R. M.
Cherokee Co

(CODE SECTION 1234.)
 (FOR THOSE ALREADY ENROLLED.)

No. 5470

INDIGENT
 SOLDIER'S PENSION
 1905.

Name R. M. Hunt
 County Cherokee
 Co. B Regiment 43

WARRANT ISSUED
16 Jan 1905.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, Manager, for State Printer, Atlanta.

no date

Hunt, R. M.
Cherokee County

(CODE SECTION 1234.)
 (FOR THOSE ALREADY ENROLLED.)

No. 2936

INDIGENT
 SOLDIER'S PENSION
 1906.

Name R. M. Hunt
 County Cherokee
 Co. B Regiment 43

WARRANT ISSUED
FEB 1 1906.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, Manager, for State Printer, Atlanta.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears

R. M. Hunt 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 61 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 yrs in Company B, of 43th Regiment of Vol; that his physical condition is as follows: Infirmary and poverty

that his property consists of the following items: Household

of the value of 225 Dollars. I am now earning, by my labor, _____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 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 16 day of Jan 1905. R. M. Hunt Ordinary.

STATE OF GEORGIA,

Cherokee County.

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

Given under my official signature and seal, this 16 day of Jan 1905.

W. J. Webb 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

R. M. Hunt 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 April 1844; 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 Geo) during the war between the States, and served for the term of 3 in Company B, of 43th Regiment of Vol; that his physical condition is as follows: Infirmary and poverty

that his property consists of the following items: Household

of the value of sixty 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 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. R. M. Hunt Ordinary.

State of Georgia,

Cherokee County.

I, W. J. Webb Ordinary of said County, do certify that I am well acquainted with R. M. Hunt 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. Webb Ordinary Cherokee County.



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

Am
your
seal
here

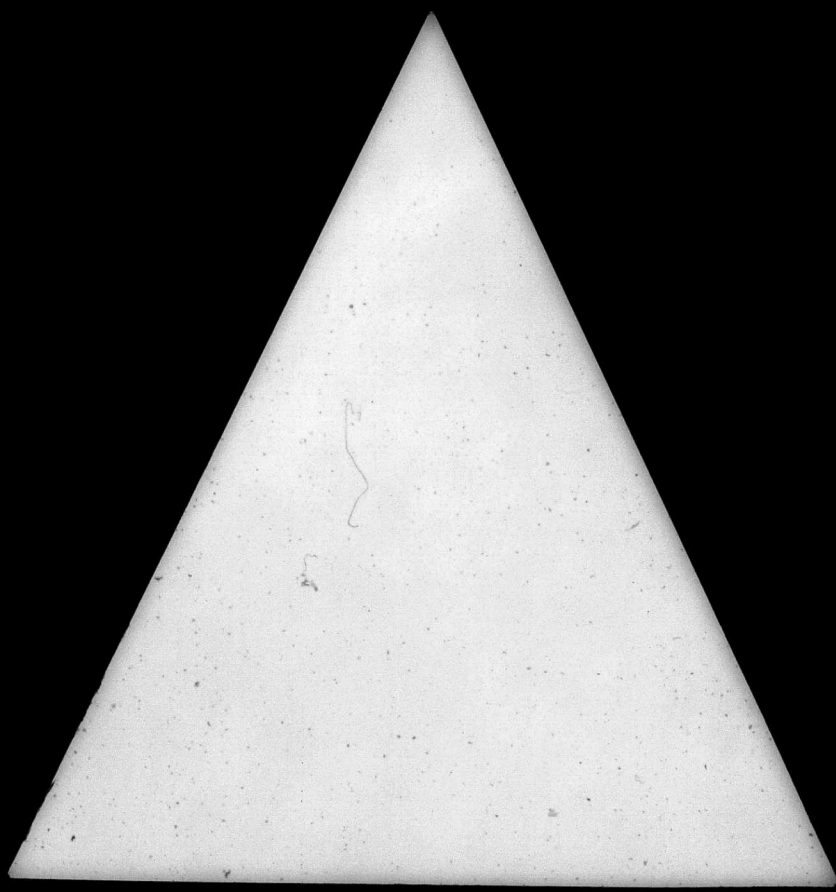
Ordinary Cherokee County.

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

Am
your
seal
here

Ordinary Cherokee County.

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



POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County, }

I, Thomas W. Hunt hereby authorize
Mr. J. Wright of Houston County

to receive and receipt for the pension allowed and request that he remit same to J. L. Brown

living at Laurens by book

Witness my hand and seal this 18

Executed in presence of

J. L. Brown reading
of Cherokee County
Thomas W. Hunt 1895.

at Dept 16 July 1895
 Affidavit not complete
 Land returned in own
 name Richard Johnson

OK OK
 Hunt Thomas W.
 No. 324
Cherokee Co.

INDIGENT PENSION

1895. 1896
So Col. Co. 1897

Name Thomas W. Hunt

County Cherokee

Ground

July 1 1895
 RICHARD JOHNSON,
 Secretary Executive Department.

WARRANT ISSUED TO
E. W. Hart

A. C. Cunningham
of Cherokee County

My Dykt 16 July 1895
 It isn't yet complete --
 Land returned in one
 name
 Pick of them
 in

Hunt No. 324
Chesapeake
OK

INDIGENT PENSION

1896. ~~1897~~
Lo. 6-18-97

Name Thomas W. Hunt

County: Lehigh

Summary

July 1 1898
RICHARD JOHNSON,

Secretary Executive Department.

WARRANT ISSUED TO

Col. W. H. Hartsuff, State Printer, Atlanta.

Give age and sex of children and their means of support? *I am, my wife is living*

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
18 day of *April* 1895. } *Thomas W. Hunt*
Applicant.
D. C. Corron Ordinary
of *Cherokee* County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Cherokee County.

William Hunter of said State and County, having been presented as a witness in support of the application of *Thomas W. Hunt* 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? *William Hunter*
Cherokee County
2. Are you acquainted with *Thomas W. Hunt*, the applicant, if so how long have you known him? *Some 30 or 35 years*
3. Where does he reside, and how long has he been a resident of this State? *in Cherokee County. I have known him in the State 35 years*
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? *I know he served in Confederate army*
I served with him
5. When, where and in what company and regiment did he enlist? *March 1862 in Cherokee County Company B 42d Regt*
6. Were you a member of the same company and regiment? *I was*
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? *Some 13 months*
was discharged in Spring of 1862 at Vicksburg Miss
8. What property, effects or income has the applicant? (Give your means of knowledge.)
none of my knowledge
9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same? *if he owned any I don't know any thing about it*
10. What is the applicant's occupation and physical condition? *farming*
he is a feeble man
11. Is the applicant unable to support himself by labor of any sort, if so, why? *I think he is*
12. How was he supported during the years 1893 and 1894? *could not say*
13. What portion of his support for these two years was derived from his own labor or income?
very small
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? *he is in feeble health & not able to do hard labor*
15. What interest have you in the recovery of a pension by this applicant? *none*

Sworn to and subscribed before me, this
the 18 day of *April* 1895. } *William Hunter*
Applicant.
D. C. Corron ordinary

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Cherokee County.

Personally came before me *J. M. Norph* and
J. F. Freeman, both known to me as reputable physicians
of said county, who being severally sworn, say on oath that they have examined carefully.

Thomas W. Hunt, applicant for pension under the Act of 1894, and after such personal examination, say that his precise physical condition is as follows:

We have examined Mr T. W. Hunt and find him to have a Bronchial affection caused from a relapse of measles. While in the service of the war he also has Rheumatism of the right arm he has haemorrhoids in a very aggravated state and he has a heart trouble he is generally weak

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 18 day of *April* 1895.

J. M. Harpe M.D.
J. F. Freeman

D. C. Corron ordinary

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cherokee County.

I, *D. C. Corron*, Ordinary in and for said County, hereby certify that the applicant *Thomas W. Hunt* 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:
J. M. Norph, J. F. Freeman & William Hunter 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, _____ dollars of property, and in 1894, *Five Hundred & 18* dollars of property.

Witness my hand and seal of office, this 18 day of *April* 1895.

D. C. Corron 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."

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

Sworn to and subscribed before me, this

the 18th day of *April* 1895.

D. C. Corcoran

William H. Hunter
Applicant.

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."

State of Georgia. Personally appeared before
Johnston Hunt the undersigned Ordinary in
and for said County Thomas H. Hunt and
J. M. Hunt both Citizens of said County who
on oath says that the Lands that appear on the
tax Digest as being Returned by Thomas H. Hunt
is with his own property both now Returned by
him as Guardian for some minor children
that of which says that the said Thomas H. Hunt
has no property of his own to rely on for a
support & is in very feeble health from a stroke
of Paralysis & has been in feeble health for some
three years

Sworn to & subscribed before me at Tallahassee
D. C. Corcoran, (Ordinary)
of Johnston County

J. M. Hunt
J. M. Hunt

Holly Springs La Oct 5, 1895
This is to certify that I have
known Mr. Thos. H. Hunt
for several years and I have
always known him to be
very badly afflicted and in
great of pain from his stroke
terminated in a severe stroke
of Paralysis of the left side
from which he was unable
to be off of his bed for quite
a while but he is now able
to be up & move around.
He has no use
of his left arm & but little
use of left leg & cannot
perform any kind of man-
ual labor his support depends
entirely upon his family

They are very poor people
 & get their living by farming
 He has no talent of his
 own His children own a
 40 acre lot of land near
 Hallowing, but it is too poor for
 them to make a living, and
 they must land to farm on
 As his Physician will
 say that it is not at all
 probable that Mr Hunt will
 ever become much better
 condition as to health than
 he is at present time

Wm. Dr. J. Dr. M.D.
 I am to and returned
 he gave me this 5 day Oct 1894
 C. B. Regdall at R. 18.10

We the neighbors of
 Chas. W. Hunt wish to certify
 that he is Paralyzed and in
 a very feeble state of health
 and not able to do any
 labor. What can we do
 for his family are poor and
 industrious and make
 their support on a rented
 farm. And we think that
 if there are any men
 laboring a pension from
 disability, infirmity and family
 that enough he is.

Names	
W. M. McKelvie	J. V. Sulphill
W. T. Kirk	W. J. Gorman
J. H. McCallum	W. B. Quinn
G. H. Reynolds	W. J. Warford
G. J. Kewbort	J. B. Blanton
C. M. Loving	A. M. Gorman
F. P. Richison	W. R. Silvers

They are very poor people
get their living by farming
He has no fault of his
own His children own a
40 acre lot of land near
Holly Springs, but it is too poor for
them to make a living on &
they must land to farm on
As his Physician will
say that it is not at all
probable that the Hunt will
ever become ⁱⁿ much better
condition as to health than
he is at present time.

Wm. Dr. J. Dr. M.D.
He can no and expended
he has me this 5 day Oct 1894
to B. Ragsdale M.D.

NAME

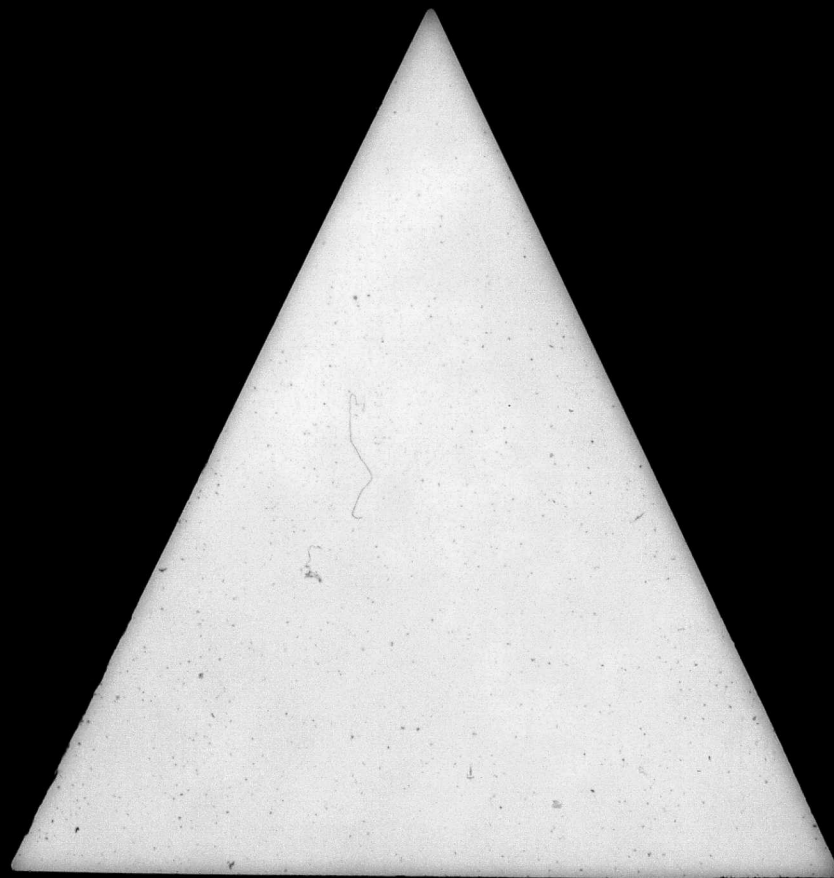
James Massey
A. B. Kinsale
J. A. Bennett
H. A. Bennett
W. A. Bennett
J. H. Bennett

They are busy from morn
 & get their living by farming
 He has no fault of his
 own His children own a
 40 acre lot of land near
 Hallowing, but it is too poor for
 them to make a living on &
 they must land to farm on
 As his Physician will
 say that it is not at all
 probable that Mr Hunt will
 ever become much better
 condition as to health than
 he is at present time

Wm Dray, M.D.
 sworn to and returned
 he before me this 5 day Oct 1894
 L B Regdall, R & G D

We the neighbors of
 Samuel W. Hunt wish to certify
 that he is Paralyzed and in
 a very feeble state of health
 and unable to do any
 labor what ever Also
 that his family are poor and
 industrious and make
 their support on a rented
 farm. And we think that
 if there are any men
 deserving a pension from
 disability, infirmity and family
 that Samuel he is.

names	
W. M. Collins	J. V. Solpfield
W. T. Kirk	W. J. Gorman
J. H. McCallum	W. H. Quinn
G. A. Reynolds	W. J. Warford
G. B. Kershner	J. B. Blanton
C. M. Loving	A. H. Gorman
F. P. Richison	W. R. Silvers



Pension office 12-10th 1910.

It is not sufficient accounting ~~to say~~ to say "home sick & wounded" must state and prove when sick or wounded how sick, with what sick, and in what way it affected him so as to prevent his returning to his command.

J. W. Lindsey Son of Penna.

*Hunter, W. A.
Cherokee Co.*
Oct 1910

+ No.

**Confederate
Soldier's Application.**

✓ UNDER ACT 1910.

County *Cherokee*
Name *W. A. Hunter*
Company *I*
Regiment *39. M.C.*
Approved *(N. Carolina)*

J. W. LINDSEY,
Commissioner of Pensions

CHAR. P. BYRD, State Printer, Atlanta.

*10/2/10
10/10/10
7-27-11*

It is not sufficient account of the wound to say that it was a gunshot wound and that it was received in the leg near the knee, and in that way it affected him so as to prevent him returning to his command.

J. W. McLeod, Clerk of Court.

North Carolina,
Macon county.

Personally appeared before me, R. M. Ledford, clerk of the superior court of Macon county, North Carolina, Dr. T. W. McLeod, a practicing physician resident at Franklin, North Carolina, whom I personally knew to be entitled to credit and being by me duly sworn says that he was and is well acquainted with William A. Hunter, now of Woodstock, Georgia, having served with said Hunter as a soldier in the late war between the States from about the 30th day of April 1862 till said William Hunter was discharged or furloughed on account of a gun shot wound received in the leg near the knee about August or September 1864, to best of affiant's recollection. This wound was received by said Hunter while engaged in a battle on or near the Kennesaw Mountain in what is commonly known as the Georgia Campaign. That affiant takes pleasure in bearing testimony to the high character of said William A. Hunter as a soldier who was at all times ready and willing to do and perform any and all duties imposed on him as such soldier. That affiant has been an active practicing physician for 30 years and well acquainted with the effects produced by such wounds as was received by the said Wm. A. Hunter and most positively asserts upon his oath that the disability produced by the said wound received by the said William A. Hunter rendered it utterly impossible for him to engage in military service again after the said wound was received till after the close of the war. That affiant is not in any way related to said William A. Hunter and has no interest direct or remote in said Hunter's application for pension.

T. W. McLeod M.D.

Sworn to and subscribed before me this the 11 day of July 1911.

R. M. Ledford

Clerk superior court of
Macon county, North Carolina.

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA
Madison County.

of said State and County is hereby presented as a witness in support of the application of *W. A. Hunter* 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? *P. B. Wild*
2. How long and since when have you known the applicant? *Since January 1st 1864*
3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? *At Woodstock, Va. since 1879*
4. When, where and in what Company and Regiment did *W. A. Hunter* serve during war from 1861 to 1865? (Give date and place) *1862. At Summerville, S.C. 3rd Reg. Va. Inf.*
5. How did you obtain your information of this Service? *He came to my house*
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) *from 1862 to July 15, 1864*
7. When and where was his Command surrendered or discharged (give date and place) *About April 1864 at Spanish Fort, Ala.*
8. Were you personally present at the Surrender? *Yes*
9. If not, where were you and how came you there?
10. Was the applicant personally present with his Command at surrender? *No*
11. If not where was he and how came him there? *At Fort M. Madison, Va.*
12. When did he leave his Command? *July 15, 1864* Where was his Command when he left it? *Practically empty* for what cause did he leave? *Was wounded*
 By whose authority did he leave? *By Captain* and how long was he granted leave? *until able to return* How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) *From my own personal knowledge*
13. In what way was he prevented from returning to his Command? *By being wounded*
 How do you know? *Was not able to return*
14. What effort did he make to return to his Command and how do you know? *None*
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 *29th* day of *April*, 1910. *P. B. Wild*
Notary Public of *Madison Co., Va.* County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA
Cherokee County.

Personally before me comes *W. A. Fowler & W. D. Bryman*, who on oath says that they are free holders residing in said County and we know *W. A. Hunter* the applicant for pension and we know the property that is now in the use, possession and control of himself and wife and of its cash value to wit: (Make List by items and value.) *One half acre land \$500.00 one cow \$20.00 water to the amount \$500.00*

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

- 1908? (State it fully by item.) *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 *14th* day of *May*, 1910. *S. A. Fowler*
Notary of *Cherokee* County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cherokee County.

I, *W. A. Hunter* Ordinary of said County, certify that I know the applicant *W. A. Hunter* for Pension is the person he represents himself to be and resides in said County. That I also know *W. A. Fowler & W. D. Bryman* the witnesses swearing to the service and *W. A. Fowler & W. D. Bryman* who are free holders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Returns of *Cherokee Co* shows that *has* and wife value for tax is in 1908 *\$527* for 1909 *\$740* for 1910 *\$549*
 Sworn under my hand and official seal of office this *10th* day of *May*, 1910.
W. A. Hunter Ordinary. *Cherokee* County.

- NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses 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; as help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
 3. All affidavits must be made before the Ordinary and certified by him.
 4. If applicant has no property at all in his possession, use or control of self and wife, affidavits of Free holders unnecessary.

North Carolina,
Macon county.

Personally appeared before me, R.M. Ledford, clerk of the superior court of Macon county, North Carolina, Dr. T.W. McLeod, a practicing physician resident at Franklin, North Carolina, whom I personally knew to be entitled to credit and being by me duly sworn says that he was and is well acquainted with William A. Hunter, now of Woodstock, Georgia, having served with said hunter as a soldier in the late war between the States from about the 30th day of April 1862 till said William Hunter was discharged or furloughed on account of a gun shot wound received in the leg near the knee about August or September 1864, to best of affiant's recollection. This wound was received by said Hunter while engaged in a battle on or near the Kennesaw Mountain in what is commonly known as the Georgia Campaign. That affiant takes pleasure in bearing testimony to the high character of said William A. Hunter as a soldier who was at all times ready and willing to do and perform any and all duties imposed on him as such soldier. That affiant has been an active practicing physician for 30 years and well acquainted with the effects produced by such wounds as was received by the said Wm. A. Hunter and most positively asserts upon his oath that the disability produced by the said wound received by the said William A. Hunter rendered it utterly impossible for him to engage in military service again after the said wound was received till after the close of the war. That affiant is not in any way related to said William A. Hunter and has no interest direct or remote in said Hunter's application for pension.

Sworn to and subscribed before me this the 11 day of July 1911.

T.W. McLeod M.D.
R.M. Ledford
Clerk superior court of
Macon county, North Carolina.

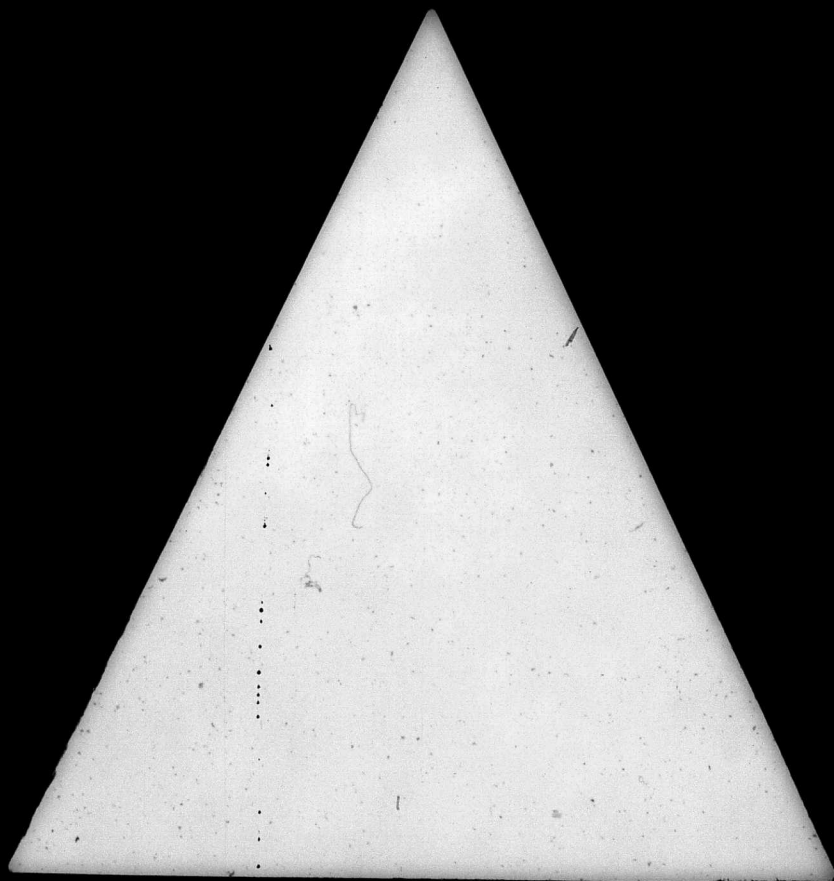
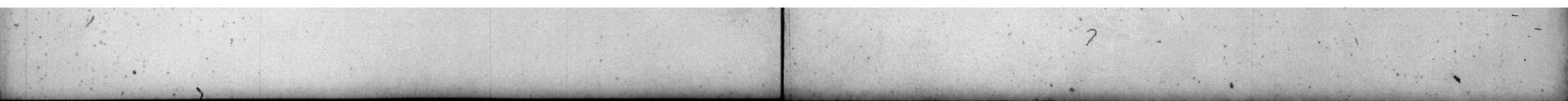
State of North Carolina,
County of Macon.

Personally came before me, R.M. Ledford, clerk of the superior court of Macon county, North Carolina, Mr. George A. Campbell of Franklin N.C. whom I knew to be a man of credit and being by me duly sworn says: That he served in Company I 39th Regiment of North Carolina State troops from May 1st 1862 to the close of the war and that ^{near Woodstock Ga} William A. Hunter served in the same company and regiment from the time of his enlistment on May the 1st 1862 till he was disabled by a gun shot wound received while in the discharge of his duties as such soldier some time during the latter part of the year 1864, in the Georgia Campaign near Kennesaw Mountain as affiant now remembers. Said Hunter was shot in the knee or near the knee, the bullet tearing away much of the muscle and going through the leaders of the under part of the leg about the knee. Affiant further swears that by reason of this wound said Hunter was disabled for service during the remaining part of the war. That said wound was a dangerous and a serious one. That said William A. Hunter was furloughed by reason of said wound and was not at any time thereafter able to again enter the service or to discharge the duties of a soldier on account of said wound.

Affiant is in no way related to the applicant, William A. Hunter and has no interest direct or remote in the case. That affiant further states upon his oath that said Hunter made a good soldier, being ready at all times to do and discharge any and all duties imposed on him. That affiant was Orderly Sergeant of said company I and was intimately and well acquainted with said Hunter and takes pleasure in testifying to his usefulness and efficiency as a soldier.

G. A. Campbell
Sworn to and subscribed before me this the 11 day of July 1911.

R.M. Ledford
Clerk Superior Court Macon
County, North Carolina.



POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY,

I, Mary Hurst, hereby authorize

M. J. Webb of Cherokee

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 13

day of June, 1906.

Mary J. Hurst [L.S.]

Executed in presence of

7 in Webb

Hurst, Mary
Cherokee, County

To Those Heretofore Paid

1906.

No. 1007

WIDOW'S PENSION

For year ending Dec. 31, 1906.

PAID TO

Mrs. Mary Hurst

OF

Cherokee County,

Widow of Jas G. Hurst

Co. F Regiment 24 " 9th

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

FEB 1

1906,

FEB 1

AND HANDLED TO

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY.

I, Mary Hunt, hereby authorize

M. J. Mable of Clinton

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 13

day of Jan 1906.

Mary Hunt [L. S.]

Executed in presence of

F. M. Webb

Hunt, Mary
Cherokee County
To Those Heretofore Paid

1906.

No. 1007

WIDOW'S PENSION

For year ending Dec. 31, 1906.

PAID TO

Mrs. Mary Hunt

OF

Cherokee County,

Widow of Jas. G. Hunt

Co. F, Regiment 24 " Inf

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT ISSUED

FEB 1

1906.

FEB 1

AND HANDED TO

See W. Lindsey, Sec. of Pensions

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY.

I, Mary Hunt, hereby authorize

M. J. Mable

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 1907.

Mary Hunt [L. S.]

Executed in presence of

J. M. Bledsoe

Hunt, Mary
Cherokee County
To Those Heretofore Paid.

1907.

No. 1695

WIDOW'S PENSION

For year ending Dec. 31, 1907.

PAID TO

Mrs. Mary Hunt

OF

Cherokee County,

Widow of Jas. G. Hunt

Co. F, Regiment 24 " Inf

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT ISSUED

FEB 13

AND HANDED TO

1007

See W. Lindsey, Sec. of Pensions

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cherokee

PERSONALLY COMES MRS.

Mary F. Hurst

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 1835 That she is the Widow of James G. Hurst who was a soldier in Company D of the 24th Regiment of Gen Volunteers, that he enlisted in said regiment on or about the month of Aug 1862 and served in the Army up to Nov 1863 That he lost his life on the day of Nov 1863 (State here particulars of the husband's death, when, where and from what cause.) was killed in 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 18before the war

I have been paid a pension as a resident of Cobb 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 13 day of Jan 1906.
M. J. Webb Ordinary.

Post Office

State of Georgia,

Cherokee County.I, W. J. Webb

Ordinary of said County, certify that I am well acquainted with Mrs. Mary Hurst, 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 1835

Given under my official signature and seal, this 13 day of Jan 1906.

{ Official
Seal }

Ordinary of Cherokee County.

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

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cherokee

PERSONALLY COMES MRS.

Mary Hurst

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 1835 That she is the Widow of James G. Hurst who was a soldier in Company D of the 24th Regiment of Gen Volunteers, that he enlisted in said regiment on or about the month of Aug 1862 and served in the Army up to Nov 1863 That he lost his life on the day of Nov 1863 (State here particulars of the husband's death, when, where and from what cause.) Killed in Battle

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, 1906, and now apply for the pension provided by law for the year ending December 31, 1907.

Sworn to and subscribed before me
this 14 day of Jan 1907.
M. J. Webb Ordinary.

Post Office

State of Georgia,

Cherokee County.I, W. J. Webb

Ordinary of said County, certify that I am well acquainted with Mrs. Mary Hurst, 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 1835

Given under my official signature and seal, this 14 day of Jan 1907.

{ Official
Seal }

Ordinary of Cherokee County.

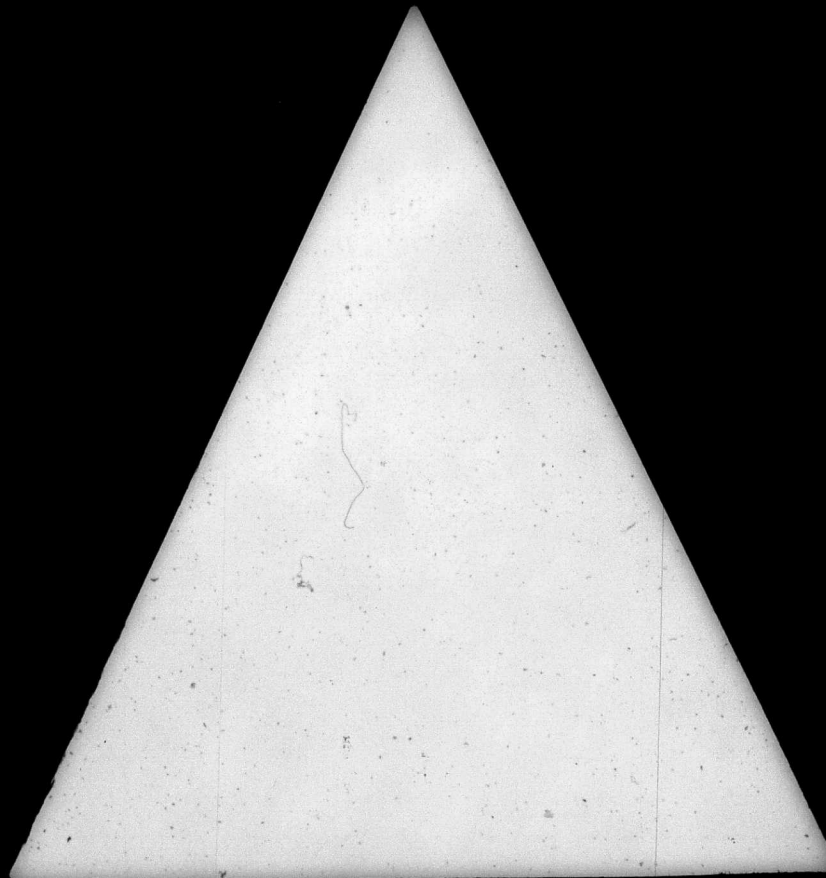
NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1907.

{ Seal }

Ordinary of Chumley County.

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

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



POWER OF ATTORNEY.

STATE OF GEORGIA.

Know all Men by these Presents, That I, Eliza Ingles
Cherokee County, }
Cherokee of Cherokee Co. Cherokee
 County, in said State, do hereby appoint Edward Ingles
 of Cherokee Co. 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 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
15th day of December 1891.

[L. S.]

Executed in the presence of us:

Edw. Ingles
O. H. Catmann

DIRECTIONS.

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



Ingles Eliza
Cherokee County

16 1891.

No. 388

Widows' Pension

Mr. Eliza Ingles
 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, *Eliza Ingles*
Edward Ingles of *Walden P.O. Cherokee*
County, in said State, do hereby appoint *Edward Ingles*
of *Walden P.O. 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 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
Eight day of *December* 1891

Executed in the presence of us:

P. J. Quinn
O. W. Patman

DIRECTIONS.

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



Widow's Pension
Eliza Ingles
Cherokee County
1891.
388
Warrant Issued
2000.00.
AND HANDED TO
1891

Geo. W. Hinton, State Printer, Atlanta.

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. *Eliza Ingles*, who being sworn according to law, says under
oath that she is the widow of *Jacob Ingles*, who was a soldier in
the service of the Confederate States, and served as a member of Company *E*
16 Regiment of *Georgia* Volunteers; that he enlisted in said
service on or about the _____ day of *July* 1861, and was in the
Confederate Army up to *August* 1862. That while in the
Army, he was on the _____ day of _____ 1862. (See Note No. 1)

he was wounded by a ball shot while in the Battle at
Malvern Hill in the State of Va. on or about the first day
of July 1862 during the seven day fighting near Richmond Va.
that he died from said wound in a Hospital in said
County of Richmond Va. on or about the first day of August
1862. Deponent only knows of his being wounded and of
his death caused by said wound from what others told
her. She was very much distressed when her said
husband died as above stated. As he has never returned
to her since he entered the army as a Soldier.

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 _____th
day of _____ 1847, and that she has resided in Georgia continuously since the
_____ day of _____ 1851; 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
26 day of *October* 1891.
O. W. Patman
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.

Affidavit for Three Witnesses.

Form No. 2.

STATE OF GEORGIA,

County of *White*

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

and *Thomas M. Vandivert* (each known to said Attesting Officer as truthful,
reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge,
Mrs. *Eliza Dugle* of the County of *Cherokee*,
State of Georgia, is the widow of *Jacob Dugle*, who was a soldier in
Company "C" of the *16th* Regiment of *Georgia* Volunteers.
That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or
about the day of *July*, 1861. That while in said service, or by

reason of said service in the Army, he lost his life as follows:

*James Glen says that he saw him in Hospital
in Richmond Va and that he was shot in 3
places & was at the point of death. When he last saw
him & that it was stated that he died soon after
he last saw him & that he has been returned to
his family.*

*John M. Nix says that he was
with him in Company "C" 16th Regiment
Ga Vols and in the same mess but was captured
at Knoxville & did not see him. He understood but
it was always understood that he was killed
as above stated & died in the Hospital at
Richmond.*

*Thomas M. Vandivert says that
he belonged to the same company with Jacob Dugle
& saw him shot in the said Battle of Malvern Hill
He had his arm amputated at the shoulder & died
soon after in the Hospital in Richmond Va.*

We further swear that Mrs. *Eliza Dugle* 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

20th day of *Nov*, 1891.

W B Bell

Ordinary.

James Glen
John M. Nix
Thomas M. Vandivert

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. *Eliza Dugle*
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 as
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

5th day of *December*, 1891.

SEAL

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, Alfred L. Berry Ordinary in and for said County of
Cherokee State of Georgia, hereby certify that I am acquainted with Mrs.
Eliza Sample 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
John Sample 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
Twenty-fourth day of January, 1893.
Alfred L. Berry Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, Cherokee County.
KNOW ALL MEN BY THESE PRESENTS, That I, Eliza Sample
of Wadley, Cherokee County
County, in said State, do hereby appoint Edmund D. Sample
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.

Eliza Sample [L.S.]
Executed in the presence of us:
Alfred L. Berry
Alfred L. Berry

DIRECTIONS.

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

Widow's Pension,
for year ending February 15th, 1893.
— PAID TO —
Eliza Sample
— OF —
Cherokee COUNTY.
Warrant Issued
24
AND HANDED TO
Eliza Sample
1893
Geo. W. Harrison, State Printer, Atlanta.

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

Form No. 2.

STATE OF GEORGIA, County of Cherokee
I, Alfred L. Berry Ordinary in and for said County of
Cherokee State of Georgia, hereby certify that I am acquainted with Mrs.
Eliza Sample 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 John Sample 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 23rd day of January, 1894.
Alfred L. Berry Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, Cherokee County.
KNOW ALL MEN BY THESE PRESENTS, That I, Eliza Sample
of Cherokee
County in said State, do hereby appoint Edmund D. Sample
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 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 23rd
day of January, 1894.

Executed in the presence of us:
Alfred L. Berry
Alfred L. Berry

DIRECTIONS.

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

Widow's Pension,
for year ending February 15th, 1894.
— PAID TO —
Eliza Sample
— OF —
Cherokee COUNTY.
Warrant Issued
23
AND HANDED TO
Eliza Sample
1894
Geo. W. Harrison, State Printer, Atlanta.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of *Cherokee*

Personally comes Mrs.

Eliza Single

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 *Twenty* years 18*25* That she is the Widow of*Lake Single* who was a Soldier in Company *B* of the *16th* Regiment of *Georgia*Volunteers, that he enlisted in said Regiment on or about the month of *July*1861 and served in the Army up to *1st August* 1862 That he lost hislife on the *Tenth* day of *August* 1862. (State here

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

His husband lost his life from gunshot wound received in the blood days fight near Richmond Virginia in the month of July 1862 and died a few days after the first of August the same year from said wound

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*25*; 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. L. Gorm* Ordinary.Post-office *Wabesa, Ga.*

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of *Cherokee*

Personally comes Mrs.

Eliza Single

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* 18*25* That she is the Widow of*Lake Single* who was a Soldier in Company *B* of the *16th* Regiment of *Georgia*Volunteers, that he enlisted in said Regiment on or about the month of *July*1861 and served in the Army up to *1st August* 1862 That he lost hislife on the *Tenth* day of *August* 1862. (State here

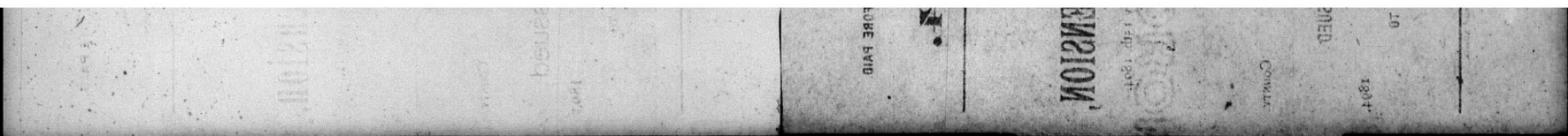
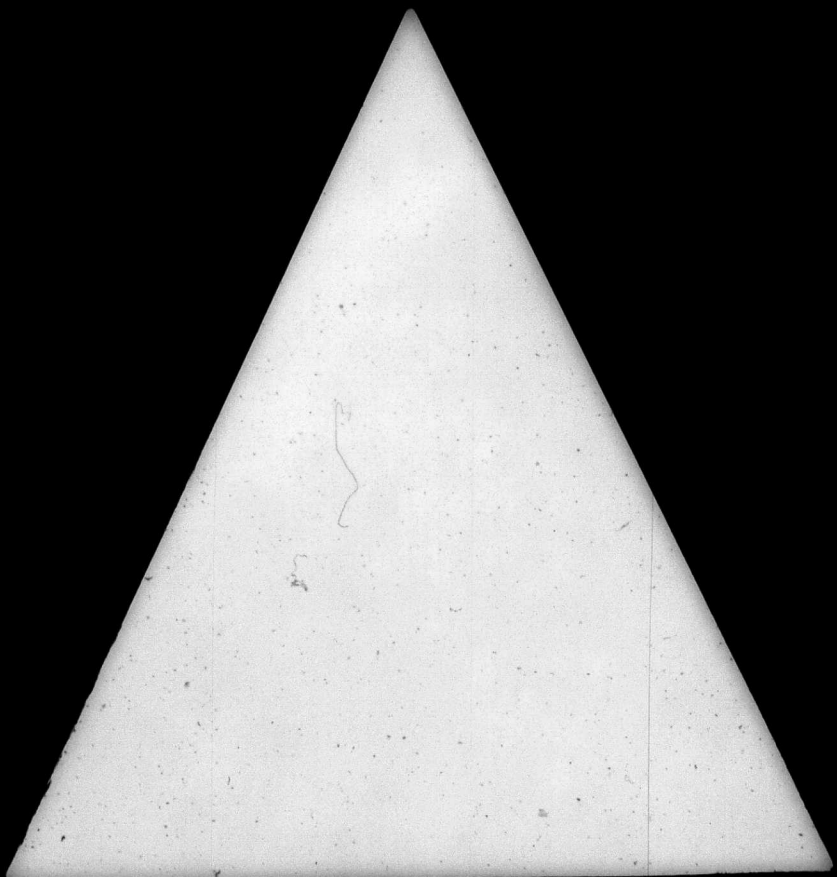
full particulars of the husband's death, when, where and from what cause.) (

His husband was wounded at the Battle of Malvern Hill Va July 1862 & died in that time from said wound

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*25*; 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

24th day of *January*, 1894.*Wm. L. Gorm* Ordinary.Post-office *Wabesa, Ga.*



STATE OF GEORGIA,

Therrell COUNTY.

COUNTRY.

I, A. H. Jackson, hereby authorize
W. J. Smith of Barter

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

by

WITNESS my hand and seal, this

1st day of June 1907

A. H. Jackson [L. S.]

Executed in presence of
J. M. Adams

E-55-

Code Bmottor 1254.

(FOR THOSE ALREADY ENROLLED)

In London Co 1906

INDIGENT SOLDIER'S PENSION 1907.

Name A. H. Jackson

County Oneida

Co. E Regiment 55th

also Prudens. Bat.

WARRANT ISSUED

FEB 13 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. HARRISON, STATE PRINTER, ATLANTA

No auto

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY.

I, A. H. Jackson, hereby authorize

W. J. Webb of Canton

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

him at Waleska

by _____

Witness my hand and seal, this 1 day of Jan 1907.

A. H. Jackson [L. S.]

Executed in presence of

J. M. Blairwood

Jackson, A. H.
Cherokee, Ga. Jan 17/06

E-55

Great Barrier 124.
(FOR THOSE ALREADY ENROLLED)

Feb 13 1907

INDIGENT
SOLDIER'S PENSION
1907.

Name A. H. Jackson
County Cherokee
Co. C Regiment 55th
Am. Provisional Bn.

WARRANT ISSUED

FEB 13 1907.
JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

[Signature]
JOHN W. LINDSEY, COMMISSIONER OF PENSIONS, ATLANTA.

W. J. Webb

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Cherokee County.

Personally appears H. H. Jackson of Chewee

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 _____ 1845; that he is 62 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 2 in Company A of 55-th Regiment of Vol. Inf. Andrew Robt. Pettit, that his physical condition is as follows: Infirmary & Poverty

that his property consists of the following items: Nothing

of the value of nothing 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 Gordon County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the

day of Jan 1907.

Ordinary.

W. G. Wrova

Ordinary.

State of Georgia,

Whitree County.

I, John J. Webb Ordinary of said County,

do certify that I am well acquainted with A. M. Jackson
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 Jan 1907

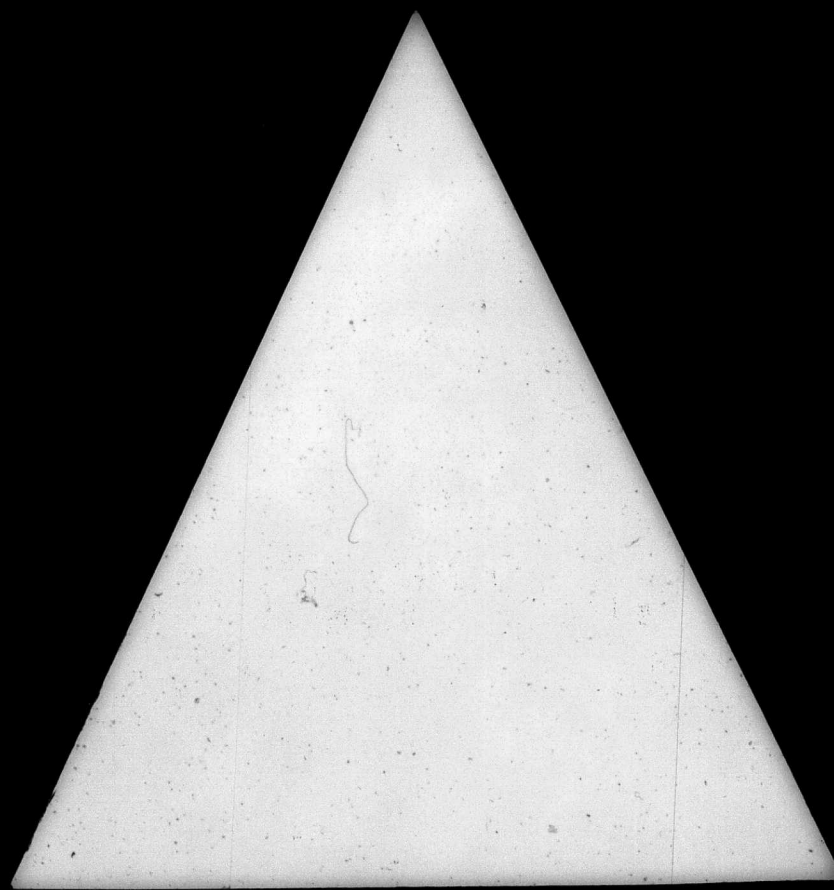
M. I. Webb

Ordinary to the tree County



NOTE.—The blank spaces must be filled

Norm.—Affidavit should not be attested before January 1st, 1907.



POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, Steph Jackson hereby authorize

Wm. H. Wright of Atlanta, Ga

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

Steph Jackson by check

at Atlanta, Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 22

day of July 1903.

Executed in presence of

Steph Jackson today

Steph Jackson [L.S.]

CODE SECTION 1499.
(FOR THOSE ALREADY ENROLLED.)

No. 2045

From 10/1/1902 to 10/1/1903
DISABLED

SOLDIER'S PENSION 1903.

Name Steph Jackson
County Cherokee

Co. 6 Regiment 42

Disability Loss of limbs

Amount, \$ 25.00

1903.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison State Printer, Atlanta.

No date

POWER OF ATTORNEY.

STATE OF GEORGIA,

Savannah County. }

I, Hopie Jackson hereby authorize

Wm. H. Wright of Atlanta Ga

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

H. C. Brown Esq by check

at Savannah Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 22nd

day of July 1908.

Hopie Jackson [L. S.]
Wm. H. Wright

Executed in presence of

H. C. Brown Esq

Jackson, Hopie
Savannah Ga

CODE SECTION 140.
(FOR THOSE ALREADY ENROLLED.)

No. 2973
Thom Wright
DISABLED

SOLDIER'S PENSION
1903.

Name Hopie Jackson
County Savannah
Co. 6 Regiment 42 Ga
Disability Loss of Right
Amount, \$25.00
2/16 1908.

JOHN W. LINDSEY,
Commissioner of Pensions.

WITNESSES
W. H. Wright
Gen. W. Harrison State Prison, Atlanta.

My date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears Whe Jackson 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 1871; 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 6, of 41th Regiment of Geo Volunteers, Rains's Brigade; that whilst engaged in such military service in the State of Georgia, on the 12 day of May 1862, he was wounded, injured or diseased as follows:

Mustet shot in Left hand, causing
Loss of three fingers

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

Sworn to and subscribed before me, this the 22 day of May 1903. } Post-office

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

STATE OF GEORGIA,

Cherokee County.

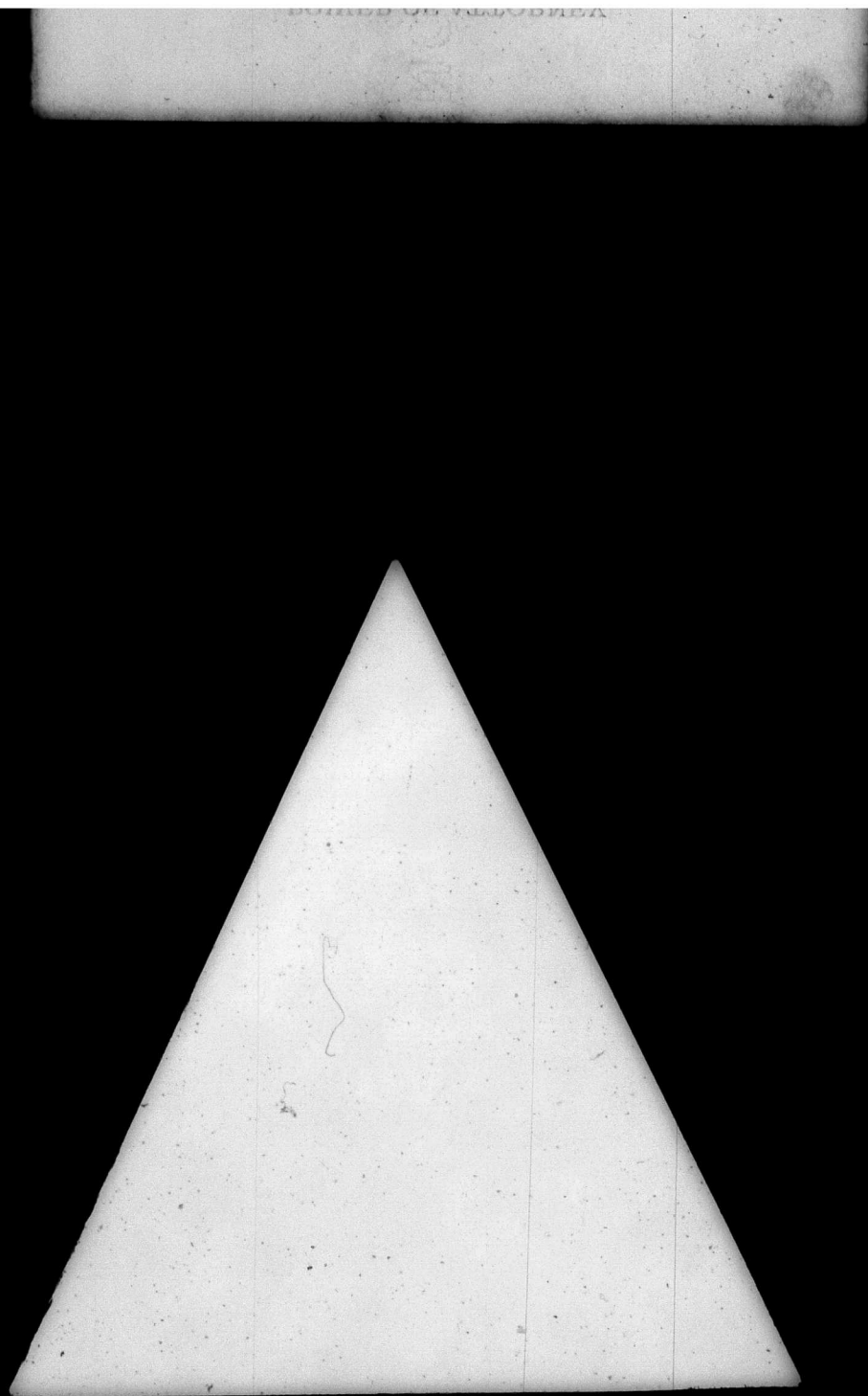
I, A. E. Carson Ordinary of said County, do certify that I am ~~well~~ acquainted with Whe Jackson the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides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

Given under my official signature and seal, this 22 day of May 1903.



A. E. Carson
Ordinary Cherokee County.

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



Jackson, William
No. 325-
Cherokee Co

INDIGENT PENSION

1895.

Name *William Jackson*

County *Cherokee*

Ground

1st Jan.

1896

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

Atty

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I,

William Jackson

hereby authorize

W. A. Smith & *Truman Smith*

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

only at *barbers* by *Robert*

Witness my hand and seal this *5th* day of *April* 1895.

Executed in presence of

W. A. Smith, only

William Jackson

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, *William Jackson* hereby authorize

W. A. Hargrett of *Fulton County*

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

only at *Lawton* by *Cherokee*

Witness my hand and seal this *5th* day of *April* 1895.

Executed in presence of

D. L. Brown, only

William Jackson

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Cherokee County.

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

1. What is your name and where do you reside? (give State, County and post office) *Lawton*
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State? *Cherokee County, Georgia, since 1887*
3. When and where were you born? *Was born in 1821 State of Ga.*
4. Did you volunteer in the Confederate Army or in the Georgia Militia? *Confederate Army*
5. When and where did you enlist? *State of Ga. 1st Battalion March 1862*
6. In what company and regiment did you enlist? *Co. B 1st S. G. Reg.*
7. How long did you remain in that company and regiment? *Two and 1/2 years*
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?
9. For how long a period did you discharge regular military duty? *More than three years*
10. When, where and under what circumstances were you discharged from service? *at the surrender of Georgia*
11. What is your present occupation? *None not able to work*
12. How much can you earn per annum by your own exertions or labor? *None*
13. What has been your occupation since 1865? *Working as long as able to work*
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 \$60 none*
15. What is your present physical condition and how long have you been in such condition? *am broke down from age cannot raise myself*
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? *The two first age and poverty & infirmity & poverty*
18. What property, effects or income do you possess? *Nothing but a small amount of house hold furniture*
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 but the above described property*
20. In what County did you reside during those years and what property did you then return for taxation? *Cherokee County small amount of house hold*
21. How were you supported during the years 1893 and 1894? *Did what I could*
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 \$60 a year some \$30 dollars*
23. What was your employment during 1893 and 1894? What pay did you receive in each year? *Did what I could or from none*
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 4 males 4 females, poor, people*

Jackson, William
No. 325-
Cherokee

INDIGENT PENSION

1895.

Name *William Jackson*

County *Cherokee*

Ground

1st Jan 1896

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDLED TO

Atty

Chas. W. Stephens, 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
5th day of April 1895. } *William Jackson*
Ordinary } Applicant.
of *Cherokee* County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Cherokee County.

Marion M. Jackson, of said State and County, having been presented as a witness in support of the application of *William Jackson* 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? *Marion M. Jackson*
Reside in Cherokee County
2. Are you acquainted with *William Jackson*, the applicant, if so how long have you known him? *35 years*
3. Where does he reside, and how long has he been a resident of this State? *in Cherokee County. I have known him since he was in the State.*
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? *I do. I saw him in the army.*
5. When, where and in what company and regiment did he enlist? *he enlisted in the Spring of '61 in Company B 15th S.C. Reg. in State of S.C.*
6. Were you a member of the same company and regiment? *I was not.*
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 performed military duty some three years was discharged at the end of the war.*
8. What property, effects or income has the applicant? (Give your means of knowledge.) *small amount of house hold goods. I have never seen him since we separated.*
9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same? *owned about the same as a horse stated.*
10. What is the applicant's occupation and physical condition? *not able to do any thing from age & disease & gravel.*
11. Is the applicant unable to support himself by labor of any sort, if so, why? *he is from age & infirmity.*
12. How was he supported during the years 1893 and 1894? *did what he could his children support the balance.*
13. What portion of his support for these two years was derived from his own labor or income? *some one fourth.*
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? *he is old and infirm & has no property.*
15. What interest have you in the recovery of a pension by this applicant? *none.*

Sworn to and subscribed before me, this
the 6th day of April 1895. } *Marion Jackson*
Ordinary } Applicant.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

County.

Personally came before me
A. M. F. Perkins and
J. P. Saxe, both known to me as reputable physicians
of said county, who being severally sworn, say on oath that they have examined carefully.

William Jackson, applicant for pension under the Act of 1894, and after such personal examination, say that his precise physical condition is as follows:

He is very feeble from age, he being seventy five years old and is a paralytic. He is entirely unable to do any manual labor & has no property to rely on for a support.

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 day of 1895.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cherokee County.

I, *D. L. Corn*, Ordinary in and for said County, hereby certify that the applicant *William Jackson* 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: *J. P. Saxe*

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, *ten* dollars of property, and in 1894, *ten* dollars of property.

Witness my hand and seal of office, this 6th day of April 1895.

D. L. Corn 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, William Jackson hereby authorize

William J. Knight of Atlanta Ga

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

A. L. Linnard by check

at San Antonio Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 20

day of Feb 1897

William Jackson
(L. S.)

Executed in presence of

A. L. Linnard

Jackson, William
Cherokee County

ACT OF 15 DEC. 1884.

(For Those Already Enrolled.)

No. 214

INDIGENT

Soldier's Pension.

1897.

Name William Jackson
County Cherokee

July 9 1897.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

Atty

W. H. JAMES, CLERK OF THE COURT, ATLANTA.

Ms dato

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears William Jackson 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 _____ 1866; that he is 35 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 over 3 years in Company 6, of 15th Regiment of S. C. Vol.; that his physical condition is as follows: Chronic Diarrhoea and General Break down

that his property consists of the following items made me 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 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 28th day of December 1896.

A. L. L. L. Ordinary.

STATE OF GEORGIA,

Cherokee County.

I, A. L. L. L. Ordinary of said County, do certify that I am well acquainted with William Jackson 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.

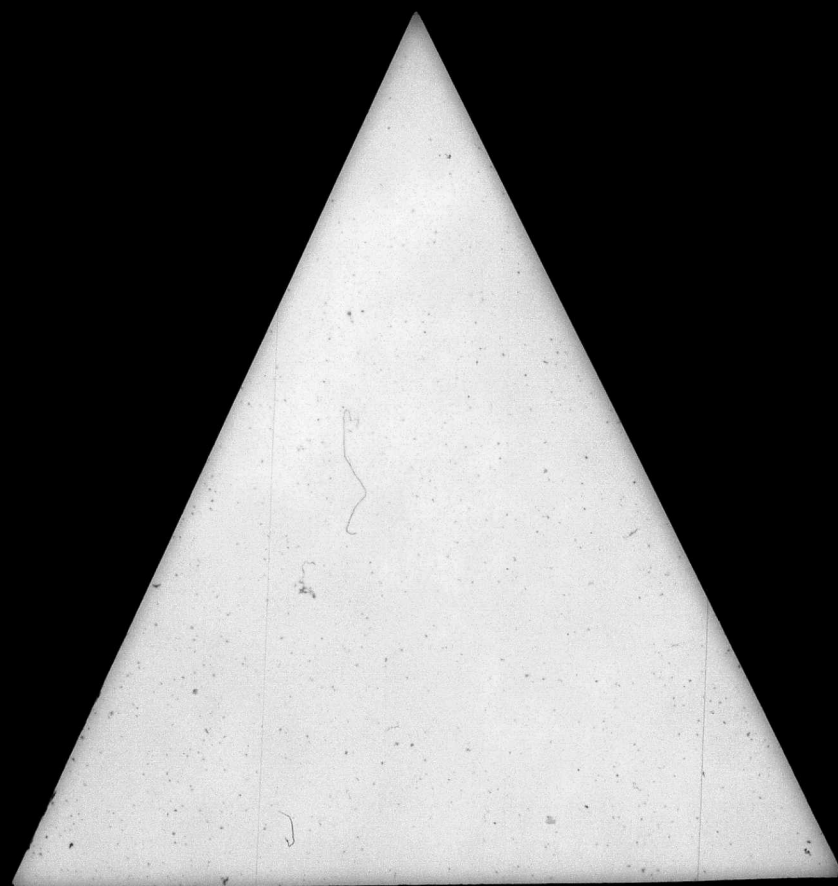
Given under my official signature and seal, this 28th day of December 1896.



A. L. L. L.

Ordinary Cherokee County.

NOTE—The blank spaces must be filled.



James John W.

Cherokee Co.

No. 2238

APPLICATION FOR ALLOWANCE

FOR YEAR ENDING OCTOBER 25, 1889

FOR

Disability from body wound on hip

Applicant John W. James

County Cherokee

Amount 50

Date of Warrant May 17

Entered on record

May 17 1889
W H W

SECRETARY EXECUTIVE DEPARTMENT

W H W

NOTES

James John W.

Cherokee Co.

No. 2238

APPLICATION FOR ALLOWANCE

FOR YEAR ENDING OCTOBER 27, 1889.

Disability from body wound by shell

Applicant John W. James

County Cherokee

Amount 50

Date of Warrant May 17

Entered on record

May 17 1889

W. H. K.

SECRETARY EXECUTIVE DEPARTMENT.

W. H. K.

STATE OF GEORGIA,

Cherokee County.

PERSONALLY appears John W. James 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 18th day of November 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 A, of 7th Regiment of S. C. Volunteers Cowshaw's Brigade; that whilst engaged in such military service, at the battle of Chancellorsville in the State of Va on the 4th day of May 1868, he was wounded as follows: by fragment of a shell striking the left hip, fracturing, as breaking the bone from which bone of Deponent has never recovered, has been a constant sufferer since receiving the wound up to the present time the wound has always been and now is a running sore which renders Deponent unable to labor. And comes on permanent bodily injury.

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

Sworn to and subscribed before me, this the 7th day of May 1889 John W. James
Ordinary, W. Putnam ordinary

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

STATE OF GEORGIA,

Cherokee County.

PERSONALLY comes before me O. W. Putnam Ordinary of said county, J. M. Price and R. A. Moore, both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined Fred W. James and after such examination say that the applicant has been injured as follows: Struck by a piece of a shell on the left shoulder taking away part of the bone and producing necrosis thereby causing a malignant ulcer of the skin which renders him practically incompetent to perform the ordinary manual avocations of life.

Sworn to and subscribed before me, this the 7th day of May 1889 J. M. Price
O. W. Putnam Ordinary, R. A. Moore

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

STATE OF GEORGIA,

Cherokee County.

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

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

I further certify that before whom the foregoing affidavits were made and power of attorney was signed, is a

ot said county, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 7th day of May 1889

Oscar W. Putnam
Ordinary Cherokee County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

Know all Men by these Presents, That I, John W. James of Cherokee county, in said State, do hereby appoint Henry W. A. Wright 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 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 7th day of May 1889

Executed in the presence of us:

Oscar W. Putnam
J. S. Dupree

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

STATE OF GEORGIA,

Cherokee County,

I, O. W. Patterson

Ordinary of said county,

do certify that I am well acquainted with John W. James 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 Justice of the Peace of said county, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 4 day of February 1892.

O. W. Patterson

Ordinary

Cherokee

County.

STATE OF GEORGIA,

Cherokee County,

I, O. W. Patterson

Ordinary of said county,

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

Given under my official signature and seal, this 7 day of March 1892.

O. W. Patterson

Ordinary

Cherokee

County.

James J. H.
Cherokee Co.
James J. H.
1890.

No. 985
APPLICATION FOR ALLOWANCE.

John W. James
disability

Applicant, James J. H.

County, Cherokee

Amount, Eight Dollars

Date of warrant, July 5

Entered on record

July 5 1890

do not

no additional data

CR J. H. H.

Cherokee Co.
James J. H.
July 5 1890

SOLDIER'S PENSION.

1892.

FOR THE YEAR ENDING OCTOBER 31, 1892.

Name John W. James

County Cherokee

Disability Dis. leg

Amount, \$ 50.00

Entered on record March 1892.

W. H. HARRISON,

Secretary of Finance Department.

W. H. H.

Cherokee

STATE OF GEORGIA

For Applicants Heretofore Allowed Pensions

STATE OF GEORGIA

For Applicants Heretofore Allowed Pensions

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

PERSONALLY appears *John W. James* 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 *18th* day of *November* 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 *A*, of *7th* Regiment of *S. G. Infantry* Volunteers *Cherokee*'s Brigade; that whilst engaged in such military service, at the battle of *Chancellorsville* in the State of *Va*, on the *March* day of *March* 1865, he was wounded as follows: *Wound shot, in fragment of shell striking the left hip, breaking and shattering the hip bone, leaving the hip joint to be stiff, pain, extreme rendering impossible to labor, since hip joint is practically like completely 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 *\$5.00* dollars.

Sworn to and subscribed before me, this the *4th* day of *February* 1890.

O. W. Putnam Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA

Cherokee County.

KNOW ALL MEN BY THESE PRESENTS, That I, *John W. James* of *Cherokee* county, in said State, do hereby appoint *Robert B. Jones* of *Cherokee* county, 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 *March* day of *February* 1890.

John W. James [L. S.]

Executed in the presence of us:

O. W. Putnam
P. P. Dri Pre

DIRECTION.

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

PERSONALLY appears *John W. James* 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 *18th* day of *November* 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 *A*, of *7th* Regiment of *S. G. Infantry* Volunteers *Cherokee*'s Brigade; that whilst engaged in such military service at the battle of *Chancellorsville* in the State of *Virginia*, on the *March* day of *March* 1865, he was wounded as follows: *Wound shot in the left hip, breaking the bone from which wound dependent has never recovered. Pain around hip joint, and now so as rendering impossible to labor or work.*

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

\$5.00 Dollars for 1889, 1890, 1891.

Sworn to and subscribed before me this the *7th* day of *March* 1892.

O. W. Putnam 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, *John W. James* of *Cherokee* County, in said State, do hereby appoint *Charles Livingston* 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 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 *March* day of *March* 1892.

John W. James [L. S.]

Executed in the presence of us:

O. W. Putnam

DIRECTION.

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

POWER OF ATTORNEY. STATE OF GEORGIA.

Cherokee County.
Know all Men by these Presents, That I *John M. James* of *Cherokee* County, State of Georgia, do hereby appoint *William M. Harrison* 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 *10th* day of *March*, 1894.

Executed in the presence of us
Q. W. Patterson
Ordinary of said County.

Send money to me as follows, by *check* to *J. M. James* at *Cherokee* P. O. *Cherokee* County, Georgia.

Sworn to and subscribed before me this *10th* day of *March*, 1894.

James M. Harrison
1893
Application for Allowance
No. *465*
Received
Witness of *John M. James*
County of *Cherokee*
State of *Georgia*
Date of Warrant *March 10, 1894*
Entered on record *March 10, 1894*
Warrant Blanked
Secretary Executive Department
Geo. W. Harrison, State Printer, Atlanta.
No data

STATE OF GEORGIA
FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cherokee COUNTY.
Know all Men by these Presents, That I, *J. M. James* of *Cherokee* County, State of Georgia, do hereby appoint *William M. Harrison* 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 *10th* day of *March*, 1894.

Executed in the presence of us
A. B. Berry ordinary

DIRECTIONS.
Send money to me as follows, by *check* to *J. M. James* at *Cherokee* P. O. *Cherokee* County, Georgia.

James M. Harrison
Cherokee Co.
(For These Already Enrolled.)
No. *451*
Soldier's Pension.
1894.
Name *J. M. James*
County *Cherokee*
Disability *50*
Amount \$ *Paul*
1894.
W. H. HARRISON,
Secretary Executive Department.
WARRANT HANDED TO
Geo. W. Harrison, State Printer, Atlanta.
No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County, }
 PERSONALLY appears *J. H. James* 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 *12th*
 day of *November* 1865; that he enlisted in the military service of the Con-
 federate States (or of the State of) during the war between the
 States, and served as a *Private* in Company *D*, of *2*th Regiment
 of *26*th Volunteers *Burchard's* Brigade; that whilst engaged in
 such military service at the battle of *Chambersville* in the State
 of *VA*, on the *4th* day of *May* 1862, he was
 wounded as follows: *by Fragment of a Shell hitting the left hip fracturing the bone, from which issuing a bullet which entered the wound the wound has never healed and gives considerable pain*

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 *Five*
 dollars, for *the year 1893*

Sworn to and subscribed before me, this, the *12th*
 day of *March* 1893, *J. H. James*

Alfred L. Berry Ordinary of said County.

NOTE—State fully and in detail 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, *Alfred L. Berry* Ordinary of said County,
 do certify that I am well acquainted with *J. H. James* 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.

Given under my official signature and seal, this *12th* day of *March* 1893.

Alfred L. Berry Ordinary of said County.

STATE OF GEORGIA,
 POWER OF ATTORNEY

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County, }
 PERSONALLY appears *J. H. James* 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 *Nov* 1865; that he enlisted in the military service of the Con-
 federate States (or of the State of) during the war between the
 States, and served as a *Private* in Company *D*, of *2*th Regiment
 of *26th* Volunteers *Burchard's* Brigade; that whilst engaged in
 such military service at the battle of *Chambersville* in the State
 of *Virginia*, on the *4th* day of *May* 1862, he was
 wounded as follows: *Wounded by a fragment of a shell hitting the left hip, bone which caused considerable pain*

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 *12th*
 day of *March* 1894, *J. H. James*

Alfred L. Berry Ordinary of said County.

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

Given under my official signature and seal, this *12th*
 day of *March* 1894.

Alfred L. Berry Ordinary of said County.



POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

KNOW ALL MEN BY THESE PRESENTS, That I, John H. James
of Cherokee

County, State of Georgia, do hereby appoint Richard Johnson Secy. & Capt.
of Georgia my true and lawful attorney in fact, for

me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of 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 5th

day of January 1895. J. H. James [L. S.]

Executed in presence of us

N. L. Brown, Ordinary

DIRECTIONS.

Send money to me as follows, by check to N. L. Brown ordinary
Bankton Georgia to Bankton P. O.

County, Georgia.

J. H. James

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, John H. James hereby authorize N. L. Brown
Ordinary of Cherokee County

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

at Bankton Ga

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

day of July 1896.

J. H. James [L. S.]

Executed in presence of us

Cherokee Co.
James, John H.
(For Those Already Enrolled.)

No. 858

SOLDIER'S PENSION.

1895.

Name John H. James
County Cherokee
Disability W. H. M. Ward
Amount, \$ 60.00
3/4 1895.

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO

Alt
No data
Geo. W. Harrison, State Printer, Atlanta.

James, John H.
Cherokee Co.
ACT OF M. OCT. 1887.
(For Those Already Enrolled.)

No. 1959

SOLDIER'S PENSION.

1896.

Name John H. James
County Cherokee
Disability W. H. M. Ward
Amount, \$ 50.00
3/2 1896.

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears John W. James of

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of 1865; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company D, of 7th Regiment of S. G. Volunteers, Winshaw's Brigade; that whilst engaged in such military service at the battle of Chambersville in the State of GA, on the 4 day of May 1865, he was wounded as follows: By Fragment of Shell in left hip
knocking off cap of hip bone

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 5 day of January 1895.

D. L. Lamm
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, D. L. Lamm Ordinary of said County, do certify that I am well acquainted with John W. James 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 5 day of January 1895.



D. L. Lamm
Ordinary of Cherokee County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears John W. James 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 Nov 1865; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company D of 7th Regiment of S. G. Volunteers, Winshaw's Brigade; that whilst engaged in such military service in the State of GA, on the 4 day of May 1865, he was wounded, injured or diseased as follows: By Explosion of Shell taking off cap of
Left hip Bone

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, 1895. I have heretofore as a resident of Cherokee county been allowed a pension of Five dollars, for the year 1894.

Sworn to and subscribed before me, this, the 5 day of July 1895.

D. L. Lamm
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, D. L. Lamm Ordinary of said County, do certify that I am well acquainted with John W. James 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 First day of Feb 1895.



D. L. Lamm
Ordinary of Cherokee County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, *Jos. W. James* hereby authorize *Wm. H. Wright*
of *Atlanta Ga*

to receive and receipt for the pension paid hereon and request that he remit same to
Allen C. Cain by *check*
at *Canton Ga.*

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *15th*
day of *January* 1897. *J W James* [L. S.]

Executed in presence of

Webb Cain

James John Wm
Cherokee County
ACT OF 31 OCT. 1867.
(For These Already Enrolled.)

No. *2867*

INVALID

SOLDIER'S PENSION.

1897.

Name *Jos. W. James*
County *Cherokee*
Disability
Amount, \$ *50⁰⁰*

1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

Wm

W. H. HARRISON, STATE PRINTER, AT WASH.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, *J. W. James* hereby authorize *L. M. Jennings*
of *Cherokee*

to receive and receipt for the pension paid hereon and request that he remit same to
me by *cash*
at *Cherokee*

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *15th*
day of *Mar* 1898. *J W James* [L. S.]

Executed in presence of

A. C. Cain only

James W.
Cherokee
ACT OF 31 OCT. 1867.
(For These Already Enrolled.)

No. *3290*

INVALID

SOLDIER'S PENSION.

1898.

Name *J. W. James*
County *Cherokee*
Disability *Wp. secured*
Amount, \$ *50⁰⁰*

1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

C. M. Jennings
W. H. HARRISON, STATE PRINTER, AT WASH.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears John W. James 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 18 day of November 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 A, of 7th Regiment of S. C. Volunteers, Kershaw's Brigade; that whilst engaged in such military service in the State of Virginia, on the 4 day of May 1863, he was wounded, injured or diseased as follows:
Wounded by shell striking me on left
hip.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1897. I have heretofore under said law as a resident of Cherokee county been allowed an invalid pension of Fifty Dollars, for the year 1896.

Sworn to and subscribed before me, this, the 15 day of January 1897. POST OFFICE Cherokee Ga

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

Given under my official signature and seal, this 15 day of January 1897.

Allen C. Coom
Ordinary Cherokee County.



For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears J. W. James 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 _____ 1861; 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 A, of 7th Regiment of S. C. Volunteers, Kershaw's Brigade; that whilst engaged in such military service in the State of VA, on the 4 day of May 1863, he was wounded, injured or diseased as follows:

In Left Hip from Explosion of
Shell causing fracture of Hip joint which
causes, running pain at this time

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

Sworn to and subscribed before me, this, the 15 day of Nov 1898. POST OFFICE Cherokee

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

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

A. C. Coom
Ordinary Cherokee County.



POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, John W. James hereby authorize W. H. Wright
of Atlanta Ga

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

A. B. Cunniff by check
at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 14th
day of January 1899.

John W. James [L. S.]

Executed in presence of

A. B. Cunniff

CODE SECTION 12A

(For Those Already Enrolled.)

No. 1740

INVALID

SOLDIER'S PENSION.

1899.

Name John W. James

County Cherokee

Disability Dis's awarded

Amount, \$ 50.00
2/15 1899.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

W

Geo. W. Harrison, State Printer, ATLANTA

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, J. W. James hereby authorize W. H. Wright
of Atlanta Ga

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

A. B. Cunniff by check at Cunniff Ga
at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 14th
day of Jan 1900.

J. W. James [L. S.]

Executed in presence of

A. B. Cunniff

James, John W.
Cherokee

(For Those Already Enrolled.)

No. 3174

INVALID

SOLDIER'S PENSION.

1900.

Name J. W. James

County Cherokee

Disability Dis's awarded

Amount, \$ 50.00
Warrant issued 20 Jan 13 1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Wright

Geo. W. Harrison, State Printer, ATLANTA

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears John W. James 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 Georgia) during the war between the States, and served as a Private in Company A, of 44th Regiment of V. C. Volunteers, Ansaw's Brigade; that whilst engaged in such military service in the State of Georgia, on the 4th day of May 1865, he was wounded, injured or diseased as follows:

By explosion of shell striking left hip and
bursting his bone which causes me now
to be almost helpless

Deponent makes application for the pension to which he is entitled for the year ending October 20th, 1899. I have heretofore under said law as a resident of

Cherokee

County been allowed an invalid pension of

Five

Dollars, for the year 1895.

Sworn to and subscribed before me, this, the

14th day of June

1899. POST OFFICE

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

Given under my official signature and seal, this 14th

day of June 1899.

A. C. Brown

Ordinary Cherokee County.



For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears J. W. James of Cherokee County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State and County, and has resided therein continuously ever since the day of 1865; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company A, of 44th Regiment of South Carolina Volunteers, Ansaw's Brigade; that whilst engaged in such military service in the State of Georgia, on the 4th day of May 1865, he was wounded, injured or diseased as follows:

Point of shell striking bone in left
hip first time was so that separation
and applicant is unable to do any labor and
is a very poor man

Deponent makes application for the pension to which he is entitled for the year ending October 20th, 1900. I have heretofore under said law as a resident of

Cherokee

County been allowed an invalid pension of

Five

Dollars, for the year 1895.

Sworn to and subscribed before me, this, the

20th day of June

1900. POST OFFICE

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

Given under my official signature and seal, this 20th

day of June 1900.

A. C. Brown

Ordinary Cherokee County.



POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, John W. James hereby authorize
H. B. Curran Ordway of Cherokee County
to receive and receipt for the pension paid hereon and request that he remit same to
me by _____
at Kanawha

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 11
day of May 1901.

STATE OF GEORGIA
J. W. James [L. S.]

Executed in presence of

H. B. Curran Ordway

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, John W. James hereby authorize
H. B. Curran Ordway of Cherokee County
to receive and receipt for the pension paid hereon and request that he remit same to
me by _____
at Kanawha

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 11
day of May 1901.

STATE OF GEORGIA
J. W. James [L. S.]

Executed in presence of

H. B. Curran Ordway

James, John W.
Cherokee Co.

CODE SECTION 120
(FOR THOSE ALREADY ENROLLED.)

No. 2464

DISABLED
SOLDIER'S PENSION.
1901.

Name John W. James
County Cherokee
Disability Slip advanced
Amount, \$ 50.00

5/12 1901.

JOHN W. LANDSEY,
Comptroller of Pensions.

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

No data

James, J. W. (John W.)
Cherokee Co.

CODE SECTION 120
(FOR THOSE ALREADY ENROLLED.)

No. 2111

DISABLED
SOLDIER'S PENSION.
1902.

Name John W. James
County Cherokee
Co. A Regiment 4th
Disability Slip advanced
Amount, \$ 50

2/4 1902.

JOHN W. LANDSEY,
Comptroller of Pensions.

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

No data

STATE OF GEORGIA

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

STATE OF GEORGIA

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears John W. James 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 1866; 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 H, of 4th Regiment of South Carolina Volunteers, Bershaw's Brigade; that whilst engaged in such military service in the State of Georgia, on the 4 day of May 1867, he was wounded, injured or diseased as follows:

Burnt shell in Left Hip Shriveling Bone
and keeping up operations all the time

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

Sworn to and subscribed before me, this the 22 day of July 1901. John W. James Postoffice D. C. Berry

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

STATE OF GEORGIA,

Cherokee County.

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

Given under my official signature and seal, this 8 day of July 1901.

A. C. Berry Ordinary Cherokee County.



FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears John W. James 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 1866; 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 4th Regiment of S. C. Volunteers, Bershaw's Brigade; that whilst engaged in such military service in the State of Georgia, on the 4 day of May 1867, he was wounded, injured or diseased as follows:

Burnt shell wound in Left Hip

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

Sworn to and subscribed before me, this the 11 day of July 1902. John W. James Post-office D. C. Berry

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

STATE OF GEORGIA,

Cherokee County.

I, A. C. Berry Ordinary of said County, do certify that I am well acquainted with John W. James 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 11 day of July 1902.



A. C. Berry Ordinary Cherokee County.

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

HOME OF VILLOMIA

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County. }

I, J. W. James hereby authorize
Mr. S. Wright of Atlanta Ga.
to receive and receipt for the pension paid hereon and request that he remit same to
S. C. Brown, Ordry by check
at Atlanta Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 5th
day of May 1903.

Executed in presence of

S. C. Brown, Ordry

J. W. James [L. S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County. }

I, J. W. James hereby authorize
Mr. S. Wright of Atlanta Ga.
to receive and receipt for the pension paid hereon, and request that he remit same to
S. C. Brown, Ordry by check
at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 5th
day of May 1904.

Executed in presence of

S. C. Brown, Ordry

J. W. James [L. S.]

James, John W.
Cherokee Co

(FOR THOSE ALREADY ENROLLED.)

No. 2215

DISABLED

SOLDIER'S PENSION

1903.

Name J. W. James
County Cherokee
Co. A. V. 4th Regiment S. C.
Disability Dep. arms
Amount, \$ 50.00
2/16 1903.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta

By date

James, John W.
Cherokee Co.

(FOR THOSE ALREADY ENROLLED.)

No. 2266

DISABLED

SOLDIER'S PENSION

1904.

Name J. W. James
County Cherokee
Co. A. V. 4th Regiment S. C.
Disability Dep. arms
Amount, \$ 50.00

FEB 18 1904.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Ordry
Geo. W. Harrison, State Printer, Atlanta

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears John W. James 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 4th of 4th Regiment of Volunteers, Kershaw's Brigade; that whilst engaged in such military service in the State of va, on the 4 day of May 1865, he was wounded, injured or diseased as follows:

Explosion of shell in left hip

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1903. I have heretofore, under said law, as a resident of Cherokee County, been allowed an invalid pension of 5.00 Dollars, for the year 1902.

Sworn to and subscribed before me, this the 5th day of May 1903. } Post-office Cherokee

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

STATE OF GEORGIA,

Cherokee County.

I, W. C. Brown Ordinary of said County, do certify that I am well acquainted with John W. James 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 1903.

Ordinary Cherokee County.

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

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



FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee County.

Personally appears John W. James 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 4th of 4th Regiment of Volunteers, Kershaw's Brigade; that whilst engaged in such military service in the State of va, on the 4 day of May 1865, he was wounded, injured or diseased as follows:

By explosion of shell in left hip

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1904. I have heretofore, under said law, as a resident of Cherokee County, been allowed an invalid pension of 5.00 Dollars, for the year 1903.

Sworn to and subscribed before me, this the 5th day of May 1904. } Post-office Cherokee

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

STATE OF GEORGIA,

Cherokee County.

I, W. C. Brown Ordinary of said County, do certify that I am well acquainted with John W. James 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.

Ordinary Cherokee County.

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

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



POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY.

I, John W. James hereby authorize
W. J. Webb of Cherokee County
to receive and receipt for the pension paid hereon, and request that he remit same to
by _____
at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 18
day of Jan 1905.

Executed in the presence of

John W. James

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

No. 3334

DISABLED

SOLDIER'S PENSION

1905.

Name John W. James

County Cherokee

Co. A Regiment 7th

Disability Grant in 1864

Amount, \$ 50

FEB 23 1905.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

The Pensioners and Pensioners Co., Atlanta
Geo. W. Harrison, Manager, for First Pension

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY.

I, John W. James hereby authorize
W. J. Webb of Cherokee
to receive and receipt for the pension paid hereon, and request that he remit same to
by _____
at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 17
day of Jan 1905.

Executed in the presence of

W. J. Webb

John W. James [L. S.]

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

No. 1106

DISABLED

SOLDIER'S PENSION

1906.

Name John W. James

County Cherokee

Co. A Regiment 7th

Disability Shot in hip & leg

Amount, \$ 50

1906.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

The Pensioners and Pensioners Co., Atlanta
Geo. W. Harrison, Manager, for First Pension

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cherokee COUNTY.

Personally appears Jos M James 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 15 day of Nov 1865; that he enlisted in the military service of the Confederate States (or of the State of S.C.) during the war between the States, and served as a Private in Company A, of 7th Regiment of S.C. Volunteers Winthrop's Brigade; that whilst engaged in such military service in the State of Va, on the 4 day of May 1863, he was wounded, injured or diseased as follows: gunshot wound in left hip

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

Sworn to and subscribed before me, this the 18 day of Jan 1905. W. J. Webb Ord. } John M James Post-office

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

STATE OF GEORGIA,

Cherokee COUNTY.

I, W. J. Webb Ordinary of said County, do certify that I am well acquainted with Jos M James 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 18th day of January 1905.

W. J. Webb Ordinary Cherokee County.

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



FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Cherokee County.

Personally appears Jos M James 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 fall of 1865; that he enlisted in the military service of the Confederate States, (or of the State of S.C.) during the war between the States, and served as a Private in Company A, of 7th Regiment of S.C. Volunteers Winthrop's Brigade; that whilst engaged in such military service in the State of Va, on the 4 day of May 1863, he was wounded, injured or diseased as follows: Shot in hip and leg

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

Sworn to and subscribed before me, this the 12 day of Jan 1906. W. J. Webb } Jos M James Post-Office

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

State of Georgia,

Cherokee County.

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

Given under my official signature and seal, this 12 day of Jan 1906.

W. J. Webb Ordinary Cherokee County.

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



POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee COUNTY.

I, J. W. James, hereby authorize
M. J. Webb of _____

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

at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 21
day of Jan 1907.

J. W. James [L. S.]
Executed in presence of
J. M. Blackwell

*James, John W.
Cherokee Co.*

Cons. Sec. 1250.
(FOR THOSE ALREADY ENROLLED)

No. 2031

**DISABLED
SOLDIER'S PENSION
1907.**

Name J. W. James
County Cherokee
Co. A 7. Regiment S. C.
Disability Disabled by
Amount, \$50.00

FEB 13 1907.
JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. HANCOCK, STATE PRINTER, ATLANTA.

no data

Cherokee

Maimed Soldiers.

Audited May 23 1889.

Wm. R. M. Smith
COMPTROLLER-GENERAL.

Voucher No. 2238

Amount, \$ 50.

Paid to John W. James
For Disability from
body wound.

May 18 1889.

Included in Warrant No. _____

issued to Treasurer.

No direction 1889.

WARRANT CLERK.

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

Watt

FOR VETERANS, WIDOWS, ORPHANS, AND PENSIONS

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Cherokee County.

Personally appears J. W. James 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 1863; that he enlisted in the military service of the Confederate States (or of the State of S. C.) during the war between the States, and served as a Private in Company A, of 7th Regiment of S. C. Volunteers Amstutz's Brigade; that whilst engaged in such military service in the State of va, on the 4 day of May 1863, he was wounded, injured or diseased as follows:

Shot in hip

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1907. I have heretofore, under said law, as a resident of Cherokee County, been allowed an invalid pension of Fifty Dollars, for the year 1906.

Sworn to and subscribed before me, this the 21 day of Jan 1907. J. W. James Postoffice Cherokee

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

State of Georgia,

Cherokee County.

I, W. J. Webb Ordinary of said County, do certify that I am well acquainted with J. W. James 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 21 day of Jan 1907.

W. J. Webb Ordinary, Cherokee County.

AMS
JUL
1907

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

No. 2238

STATE OF GEORGIA,

EXECUTIVE DEPARTMENT.

Atlanta, Ga May 18 1889.

Mr John W James 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 Disability from body wounds 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, 1889

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

By the Governor

W. H. Harrison CLERK EXECUTIVE DEPARTMENT.

J. P. Gordon GOVERNOR.

50.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty 00/18 Dollars, per above voucher, this 18 of May 1889.

John W James
W. Wright

OFFICE OF
DR. W. L. COLEMAN,
PHYSICIAN AND DRUGGIST.

Santon, Ga., Jan 15th 1897

This is to certify that we have carefully examined Mr John W. James, and we find a wound of the left Oleum near the crest, produced by a piece of Shell, said wound producing a bad necrosis from which constantly issues a fetid discharge which keeps his general health very much impaired, due to septic infection from the constant fetid discharge. The absorption is of such a nature that he is constantly under treatment to keep the infection from proving fatal. He is during the summer months unable to do manual labor sufficient to support himself and those dependent upon him.

W. L. Coleman M.D.
Sworn to & subscribed V. M. Harpe M.D.
Before me Jan 15th 1897

A. C. Borm, ordy

Audited

18

COMPTROLLER GENERAL

Charles

Maimed Soldiers.

Voucher No. 285

Amount \$ 50

Paid to John W. James
For Left leg, etc.

Deby ✓ 1890

Included in warrant No.

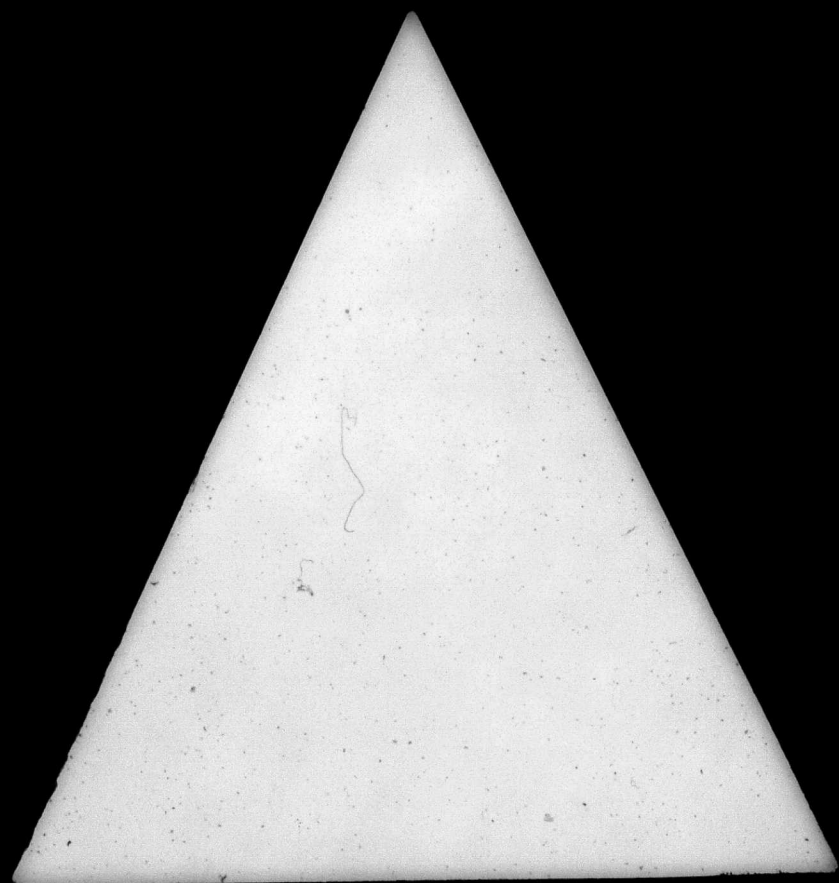
issued to Treasurer.

18

WARRANT CLERK.

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

R. J. Jones



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 _____ 1899.

Executed in presence of _____

(L. S.)

RECEIVED

STATE OF GEORGIA

Glynn

Johnson

Jarmen Thomas R
Cherokee County

1900 R

INDIGENT PENSION

1900
1899.

Name Jarmen Thomas R

County Cherokee

Approved _____ 1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

2nd

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

3/6/99

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 _____ 1899.

Executed in presence of _____

(L. S.)

Questions for Applicant.

STATE OF GEORGIA.

County.

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

1. What is your name and where do you reside? (give State, County and post office). *James R. Johnson in Cherokee County Ga.*
2. How long and since when have you been a resident of this State? *have been in the State since about 1855 or 1860.*
3. When and where were you born? *in Georgia Ga. in 1815 or 1816.*
4. When and where and in what company and regiment did you enlist or serve? *in March 1862 in Co. A 1st Ga. Cavalry 1st Div. 1st Corps 24th Regt. Ga. Cavalry.*
5. How long did you remain in such company and regiment? *till the end of the war, viz. March 26th day of Dec. 1865. But I was held a prisoner till summer of 1865.*
6. For how long a period did you discharge regular military duty? *some three years.*
7. When, where and under what circumstances were you discharged from service? *was discharged from service as a prisoner of the Confederate Army in 1865.*
8. What is your present occupation? *farming.*
9. How much can you earn (gross) per annum by your own exertions or labor? *some \$500.*
10. What has been your occupation since 1865? *farming.*
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"? *2 & 3.*
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? *Infirmary & Blindness also heard have taken of Thomas R. Johnson & spinal operations.*
13. What property, effects or income do you possess, and its gross value? *have one or two horses one old and small amount of household furniture and some other things.*
14. What property, effects or income did you possess in 1894, 1895, 1896, 1897 and 1898, and what disposition, if any, did you make of same? *in 1894 I sold some land and some other things for the same I also sold some other things for a small amount of personal property.*
15. In what County did you reside during those years, and what property did you then return for taxation? *resided in Cherokee County in 1894, 1895, 1896, 1897 and 1898 on Cherokee.*
16. How were you supported during the years 1897 and 1898? *have all been and received help from children living with me at that time.*
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? *cost some \$200 a year in 1897 and some \$100 in 1898.*
18. What was your employment during 1897 and 1898? What pay did you receive in each year? *have not been in a position to receive any pay.*
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? *have wife & children all of age. all have one daughter living with me that is almost an invalid.*
20. Are you receiving any pension? If so, what amount, and for what disability? *Receive no pension.*

Sworn to and subscribed before me this the _____ day of _____ 1899.

_____ of _____ County.

_____ Applicant.

Every Question MUST be Answered.

James R. Johnson
Cherokee County

1899
1900
1899.

Name *James R. Johnson*
County *Cherokee*

Approved _____ 1899.
RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
John

W. H. HARRISON, STATE PRINTER, ATLANTA.

3/649

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Cherokee COUNTY.

David Kennedy, of said State and County, having been presented as a witness in support of the application of Thomas R. Garrison for pension under Section 1254, Code, 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? David Kennedy
in Paulding Co. Ga.
2. Are you acquainted with T. R. Garrison, the applicant; if so how long have you known him? for fifty years
3. Where does he reside, and how long and since when has he been a resident of this State? in Cherokee Co. Ga. for 50 years
4. When, where and in what company and regiment did he enlist, and how do you know? March 1862 in Paulding Co. Ga. Garrison Dr. 36 Regt. Ga.
5. Were you a member of the same company and regiment? Yes
6. 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? about two years was captured at Missionary in Tenn. in Nov. 1863 and was held as prisoner of war until surrendered in 1865 was discharged from Prison.
7. What property, effects or income has the applicant? (Give your means of knowledge.) he has large tracts of land and household goods all valued at \$50.00 I have lived near him for several years since
8. What property, effects or income did the applicant possess in 1897, 1898 and 1899, and what disposition, if any, did he make of same? he has had some property except personal property as above stated I don't know it
9. Has he conveyed away any of his property in the last three years, if so, what was it, and to whom? has not had none to convey
10. What is the applicant's occupation and physical condition? Farming Physical condition is very bad - he has catarrh of stomach is very debile is not able to do manual labor
11. Is the applicant unable to support himself by labor of any sort, if so, why? he is not able to support himself by farm labor because of his feeble condition as above stated
12. How was he supported during the years 1897 and 1898? mainly by the labor of his wife that is now of age and sustains him
13. What portion of his support for those two years was derived from his own labor or income? very little the last year he was down and must all the time
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? he is very feeble unable to do manual labor has no means of support

15. What interest have you in the recovery of a pension by this applicant? None
Sworn to and subscribed before me, this 23rd day of Feb. 1899. David Kennedy Witness.

John H. Tucker Ordinary, of Paulding Co. Ga.
and further certify that David Kennedy is a citizen of this Co. & State
- and as a witness is entitled to full faith and credit this Feb 23/99

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Cherokee COUNTY.

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

We find that the applicant suffering from general debility, also partial paralysis, more on the left side. From symptoms given by applicant, shows that he has catarrh of stomach and bladder, partial blindness due to me suppression the paralysis.

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 23rd day of February 1899. John H. Tucker, M.D. Jacob M. Bates, M.D.
A. B. Curran Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cherokee COUNTY.

I, A. B. Curran, Ordinary in and for said County, hereby certify that the applicant, Thomas R. Garrison resides in said County, and has been a bona fide resident of this State since the 1892 day of 1892 and that the witnesses, viz: John H. Tucker and Jacob M. Bates are citizens of this County and 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 1897 None Dollars of property, and in 1898 None Dollars of property.

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

Witness my hand and seal of office, this 23rd day of Feb. 1899.
A. B. Curran Ordinary,
of Cherokee County.

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, T. R. Garrison hereby authorize
W. D. Wright of Atlanta Ga
 to receive and receipt for the pension allowed, and request that he remit same to
H. C. Garrison only at bank of Georgia
 by _____

Witness my hand and seal, this 21st day of January 1900.
T. R. Garrison [L. S.]

Executed in presence of

H. C. Garrison only

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, T. R. Garrison hereby authorize
H. C. Garrison only of Cherokee County
 to receive and receipt for the pension allowed and request that he remit same to
me at Atlanta Ga
 by _____

Witness my hand and seal, this 5th day of January 1901.
T. R. Garrison [L. S.]

Executed in presence of

W. A. Williamson

Garrison, T. R.
Cherokee Co.

CODE SEC. 1384.
 (For These Already Enrolled.)

536 NO. 1856

INDIGENT

SOLDIER'S PENSION,
 1900.

Name T. R. Garrison
 County Cherokee

WARRANT ISSUED

January 24 1900.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDED TO

Wright & Co
 Geo. W. Harrison, State Printer, Atlanta.

No data

Garrison, Thomas R.
Cherokee Co.

536 NO. 1856
 (For These Already Enrolled.)

No. 8675

INDIGENT
 SOLDIER'S PENSION.
 1901.

Name T. R. Garrison
 County Cherokee

WARRANT ISSUED

24th 1901.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDED TO

G. W. Garrison
 Geo. W. Harrison, State Printer, Atlanta.
No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears T. R. Jarrison 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 _____ 1884; that he is 62 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 some 15 years in Company E, of 56th Regiment of Volunteers; that his physical condition is as follows: lost an eye & muscle not able to do any work

that his property consists of the following items small amount of personal property

of the value of 40 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 Cherokee county been allowed a pension for the year 1890

Sworn to and subscribed before me, this, the 25th day of Jan 1900. A. C. Burr Ordinary.

State of Georgia, Cherokee County.

I, A. C. Burr Ordinary of said County, do certify that I am well acquainted with T. R. Jarrison 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 25th day of Jan 1900.



A. C. Burr Ordinary Cherokee County.

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cherokee County.

Personally appears T. R. Jarrison 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 _____ 1884; that he is 62 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 15 years in Company E of 56th Regiment of Volunteers; that his physical condition is as follows: almost a complete invalid not able to do any thing

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

of the value of 50 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 1890 T. R. Jarrison

Sworn to and subscribed before me, this the 5th day of May 1901. A. C. Burr Ordinary.

STATE OF GEORGIA, Cherokee County.

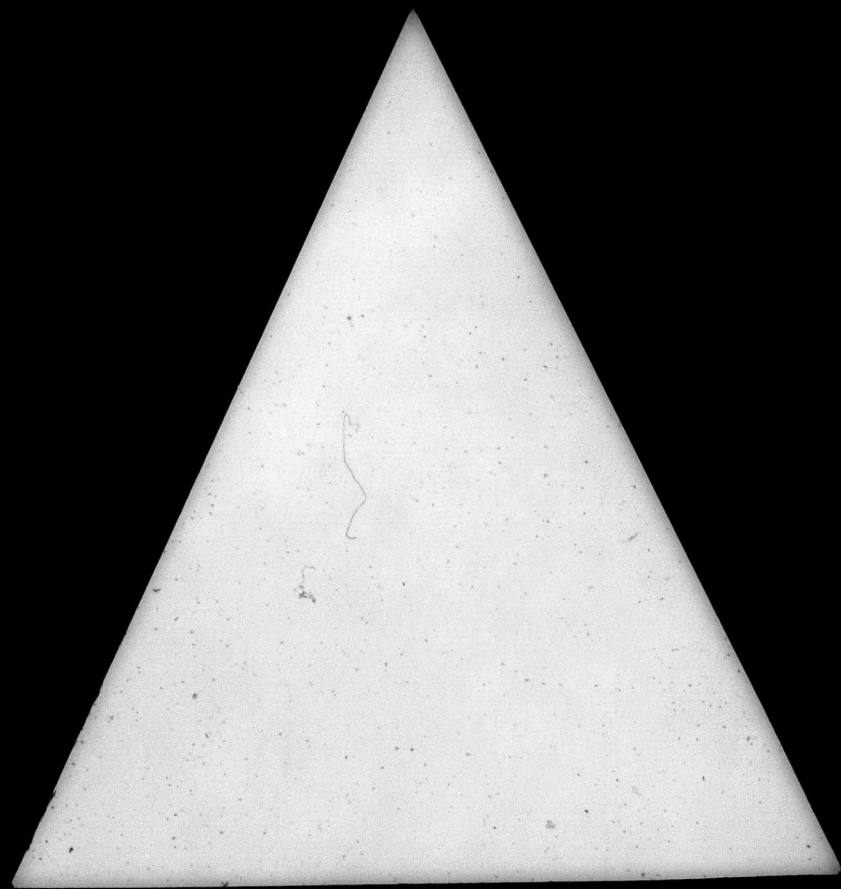
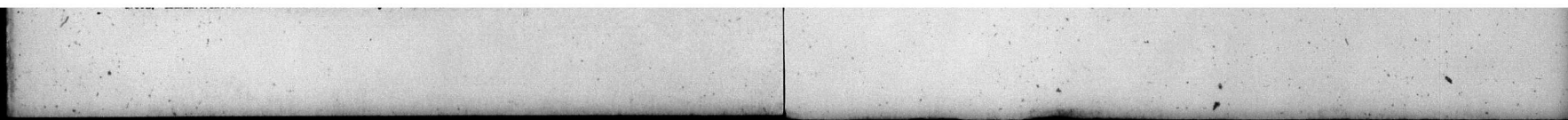
I, A. C. Burr Ordinary of said County, do certify that I am well acquainted with T. R. Jarrison the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides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

Given under my official signature and seal, this 5th day of May 1901.



A. C. Burr Ordinary Cherokee County.

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



POWER OF ATTORNEY.

STATE OF GEORGIA.

Cherokee

County.

Know all Men by these Presents, That I,

Frances Jefferson

of

Orange P.O. Cherokee

or

John B. Richards

County, in said State, do hereby appoint

of *Orange P.O. 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 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
29th day of *April* 18*91*

Executed in the presence of us:

*A. M. McKie**Callie Richmond*

DIRECTOR.

[L. S.]

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



Jefferson Frances
Cherokee County

1891.

No. 1807

Widows' Pension

— PAID TO —

Mrs. Frances Jefferson

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, *Frances Jeffers* of *Orange P.O. Cherokee* County, in said State, do hereby appoint *John B. Richeson*

of *Orange P.O. 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 *28th* day of *April* 18*91*

Executed in the presence of us:

P. M. Wellie
W. P. Patton

DIRECTIONS.

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



Frances Jeffers
Cherokee COUNTY.

WIDOWS' Pension

PAID TO—

28th 1891

536

1891.

Jefferson Grace
Cherokee County

\$100.00.

Cherokee COUNTY.

Warrant Issued

AND HANDED TO

1891

Wm. W. Harrison, State Printer Atlanta.

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. *Frances Jeffers*, who being sworn according to law, says under oath that she is the widow of *Thomas E. Jeffers*, who was a soldier in the service of the Confederate States, and served as a member of Company *E*, of the

56 Regiment of *Ga.* Volunteers; that he enlisted in said service on or about the *5th* day of *April* 1862, and was in the

Confederate Army up to *15th* *June* 1863. That while in the Army, he was on the *15th* day of *June* 1863, (See Note No. 1)

while on duty as a soldier of the 1st. Shot while in the trenches at Vicksburg in Miss. I did not know of his death from that time until some time later. She knows that her price husband never returned to his home after the war.

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 *19th* day of *September* 1844, and that she has resided in Georgia continuously since the day of *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

28 day of *April* 1891.

William W. Patton

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.

Affidavit for Three Witnesses.

Form No. 2.

STATE OF GEORGIA,

In person came before me, the undersigned Ordinary

in and for said County, witnesses

County of Cherokee

Valentine W. F. M. Wilkie

and Pharmacia Brumfield (each known to said Attesting Officer as truthful, reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge, Mrs. Francesa Jefferson, of the County of Cherokee,

State of Georgia, is the widow of William E. Jefferson, who was a soldier in Company B of the 86 Regiment of Fla Volunteers.

That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or about the 5th day of April, 1862. That while in said service, or by

reason of said service in the Army, he lost his life as follows: he was killed by

being shot in the 15 day of June while commanding his
company. he was passing or walking from his tent to his
mess room where there was a party in the distance at Vicksburg Miss
when shot through the head by shot from the enemy
and was known that he was killed as stated

We further swear that Mrs. Francesa Jefferson 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

28 day of April, 1891.

Oscar W. Putnam

Ordinary.

Valentine W. F. M. Wilkie
R. O. Brumfield

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

Form No. 3.

STATE OF GEORGIA,

I, Oscar W. Putnam

Ordinary

County of Cherokee

in and for said County of Cherokee

State of Georgia, hereby certify that I am acquainted with Mrs. Francesa Jefferson 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

28th 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 B. Beard Ordinary in and for said County of
Cherokee State of Georgia, hereby certify that I am acquainted with Mrs.
Frances Jefferson 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
Thomas E. Jefferson 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 February 1893.
Allen B. Beard Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, Cherokee County.
KNOW ALL MEN BY THESE PRESENTS, That I, Frances Jefferson
of Cherokee County
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 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 21st
day of February 1893.

Executed in the presence of us;

Allen B. Beard, Ordinary
William H. Harrison

DIRECTIONS.

Send amount by check to A. B. Beard, Ordinary to
me at Sanford Ga and oblige

Frances Jefferson

1893.
210.610
Widows' Pension,
for year ending February 15th, 1893.
—PAID TO—
—OF—
Frances Jefferson
Cherokee County.
Warrant Issued
AND HANDED TO
1893
Geo. W. Harrison, State Printer, Atlanta.

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

Form No. 2.

STATE OF GEORGIA, County of Cherokee
I, Allen B. Beard Ordinary in and for said County of
Cherokee State of Georgia, hereby certify that I am acquainted with Mrs.
Frances Jefferson 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 Thomas E. Jefferson 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 22 day of January 1894.
Allen B. Beard Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, Cherokee County.
KNOW ALL MEN BY THESE PRESENTS, That I, Frances Jefferson
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 22nd
day of January 1894.

Executed in the presence of us:

A. B. Beard, Ordinary
J. W. Burby

DIRECTIONS.

Send amount by check to A. B. Beard, Ordinary to
me at Sanford Ga and oblige

Frances Jefferson

1894.
693
Widows' Pension,
for year ending February 15th, 1894.
—PAID TO—
—OF—
Frances Jefferson
Cherokee County.
WARRANT ISSUED
AND HANDED TO
1894.
Geo. W. Harrison, State Printer, Atlanta.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cherokee

Personally comes Mrs.

Francis Jefferson

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 the year 1857. That she is the Widow ofThomas E. Jefferson who was a Soldier in Company 2 of the 36 Regiment of GeorgiaVolunteers, that he enlisted in said Regiment on or about the month of April 1862, and served in the Army up to June 1863. 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 First Lieutenant in Co. B
1st Regiment 36th and lost his life at Vicksburg
Miss. in the month of June 1863
and killed by gun shot

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 1844; 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

21st day of February 1893.Wm. L. Carr Ordinary.

Post-office

Francis Jefferson

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cherokee

Personally comes Mrs.

Francis Jefferson

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 1857. That she is the Widow ofThomas Jefferson who was a Soldier in Company 2 of the 36 Regiment of GeorgiaVolunteers, that he enlisted in said Regiment on or about the month of April 1862, and served in the Army up to June 1863. That he lost his life on the _____ day of June 1863 (State here

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

Said husband was killed at Vicksburg Miss.
in June 1863

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 1844; 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

21st day of February 1894.Wm. L. Carr Ordinary.

Post-office

Francis Jefferson

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

Form No. 4.

STATE OF GEORGIA, County of Cherokee

I, A. C. Conn Ordinary in and for said County of Cherokee State of Georgia, hereby certify that I am acquainted with Mrs. Francis Jefferson 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 Thomas Jefferson 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, 14 day of January 1895.
{SEAL} A. C. Conn Ordinary.

POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA, Cherokee County.

KNOW ALL MEN BY THESE PRESENTS, That I, Francis Jefferson of Cherokee County in said State, do hereby appoint Richard Johnson Superintendent of Georgia my true and lawful attorney in fact, for me, and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia, 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 14 day of January 1895.
Francis Jefferson [I. S.]

Executed in the presence of us:

John R. R.
A. C. Conn, Ordinary

DIRECTIONS.

Send amount by check to A. C. Conn, Ordinary to me at Canton Ga, and oblige
Francis Jefferson

for year ending February 15th, 1895.

—PAID TO—
Mrs. Francis Jefferson
—OF—
Cherokee County.
widow of Thomas Jefferson

WARRANT ISSUED
Feb 4 1895.

AND HANDED TO
Atty

Geo. W. Harrison, Clerk of Court.

Jefferson, Francis
Cherokee Co.

FOR THOSE HERETOFORE PAID.

1895.

No. 2424

WIDOW'S PENSION.

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

Form No. 4.

STATE OF GEORGIA, County of Cherokee

I, A. C. Conn Ordinary in and for said County of Cherokee State of Georgia, hereby certify that I am acquainted with Mrs. Francis Jefferson 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 Thomas Jefferson 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 20th day of January 1895.

{SEAL} A. C. Conn Ordinary.

Form No. 5.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cherokee County.

I, Francis Jefferson hereby authorize Wm. A. Wright of Atlanta Ga to receive and receipt for the pension paid hereon and request that he remit same to A. C. Conn, Ordinary at Canton Ga by check

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 20 day of January 1895.

Executed in the presence of

A. C. Conn

for year ending February 15th, 1896.

PAID TO
Mrs. Francis Jefferson
OF
Cherokee County.
widow of Thomas Jefferson

WARRANT ISSUED
21 1896.

AND HANDED TO
Atty

Geo. W. Harrison, Clerk of Court.

Jefferson, Francis
Cherokee Co.

FOR THOSE HERETOFORE PAID.

1896.

No. 239

WIDOW'S PENSION.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Cherokee

Personally Comes Mrs.

Francis Jefferson

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 December 1858 That she is the Widow of

Thomas Jefferson

who was a Soldier in Company

of the 36 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 June 1863 That he lost his

life on the day of June 1863 (State here

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

He was killed at the siege of Vicksburg Miss.

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 1844, 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

14 day of June 1895.

D. B. Carr Ordinary.

Post-office

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Cherokee

Personally Comes Mrs.

Francis Jefferson

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 1858 That she is the Widow of

Thomas Jefferson

who was a Soldier in Company

of the 36 Regiment of Georgia

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

1862 and served in the Army up to June 1863 That he lost his

life on the day of June 1863 (State here

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

was killed at Vicksburg Miss. June 1863

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 1844, 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

20 day of July 1896.

A. B. Carr Ordinary.

Post-office

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

STATE OF GEORGIA, County of Charleston
 I, A. L. Loomis Ordinary in and for said County of
Charleston State of Georgia, hereby certify that I am acquainted with Mrs.
Frances Jefferson 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 Thomas Jefferson
 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 13th day of January 1897:



A. L. Loomis

Ordinary.

Form No. 2.

POWER OF ATTORNEY.

STATE OF GEORGIA, Charleston County.
 I, Frances Jefferson hereby authorize Wm. A. Wright
 of Atlanta Ga to receive and receipt for the pension paid hereon and request
 that he remit same to A. L. Loomis at Charleston Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 13th
 day of January 1897.

Executed in the presence of

Wm. A. Loomis

Frances Jefferson [L. S.]

POWER OF ATTORNEY.

State of Georgia, Charleston County.

I, Frances Jefferson hereby authorize Wm. A. Wright
 of Atlanta Ga to receive and receipt for the pension paid hereon and request
 that he remit same to A. L. Loomis at Charleston Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 13th
 day of January 1898.

Frances Jefferson [L. S.]

Executed in the presence of

A. L. Loomis Ordinary

STATE OF GEORGIA, Charleston County.
 I, Frances Jefferson hereby authorize Wm. A. Wright
 of Atlanta Ga to receive and receipt for the pension paid hereon and request
 that he remit same to A. L. Loomis at Charleston Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 13th
 day of January 1897.

Executed in the presence of

Wm. A. Loomis

Frances Jefferson [L. S.]

Jefferson, Frances
Charleston Co

For Those Heretofore Paid.

1898.

No. 1473

WIDOW'S PENSION,

For year ending February 15th, 1898.

PAID TO

Mrs. Frances Jefferson
 of

Charleston County,

Widow of Thomas Jefferson

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

1898.

AND HANDED TO

Wm. A. Loomis

SEA. W. HARRISON, STATE PRINTER, ATLANTA.

AND HANDED TO

Wm. A. Loomis

1897.

WARRANT ISSUED

RICHARD JOHNSON,

Commissioner of Pensions.

Widow of Thomas Jefferson

Charleston County,

Mrs. Frances Jefferson
 of

PAID TO

for year ending February 15th, 1897.

WIDOW'S PENSION,

No. 638

1897.

FOR THOSE HERETOFORE PAID.

Jefferson, Frances
Charleston County

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Charleston

Personally Comes Mrs.

Thomas Jefferson

who being sworn, says on oath, that she is a bona fide resident of said county of Charleston State of Georgia, and that she has RESIDED in said State continuously ever since Dec 1862 That she is the Widow of Thomas Jefferson who was a Soldier in Company B of the 56th Regiment of Vol Volunteers, that enlisted in said regiment on or about the month of April 1862 and served in the Army up to June 1863 That he lost his life on the day of June 1863 (State here full particulars of the husband's death, when, where and from what cause.)

was killed at Vicksburg Miss June 1863

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 1844, 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 Charleston 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 15th day of July 1897. A. C. Burns Ordinary.

Post-office.

Thomas Jefferson

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Charleston

Personally Comes Mrs.

Thomas Jefferson

who, being sworn, says on oath, that she is a bona fide resident of said county of Charleston State of Georgia, and that she has RESIDED in said State continuously ever since 1845 That she is the Widow of Thomas Jefferson who was a Soldier in Company E of the 56th Regiment of Vol Volunteers, that he enlisted in said regiment on or about the month of April 1862 and served in the Army up to June 1863 That he lost his life on the day of June 1863 (State here full particulars of the husband's death, when, where and from what cause.)

was killed at Vicksburg Miss June 1863

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 1844.

I have been allowed a pension as a resident of Charleston 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 15th day of July 1898. A. C. Burns Ordinary.

Post-Office.

Thomas Jefferson

State of Georgia,

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

with Mrs. Thomas Jefferson 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 1845

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

Official Seal.

Ordinary of Charleston County.

POWER OF ATTORNEY.

State of Georgia,

Cherokee County.

I, Francis Jefferson hereby authorize W. A. Wright
of Atlanta Ga

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

A. C. Lumsden at Canton Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 16th

day of January 1899.

Francis Jefferson [L. S.]
notary

Executed in presence of

A. C. Lumsden

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, Francis Jefferson hereby authorize W. A. Wright
of Atlanta Ga

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

A. C. Lumsden at Canton Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 16th

day of Jan 1900.

Francis Jefferson [L. S.]
notary

Executed in presence of

A. C. Lumsden

Jefferson, Francis
Cherokee County
For Those Heretofore Paid.

1899.

NO. 981

WIDOW'S PENSION,

For year ending February 15th, 1899.

PAID TO

Mrs. Francis Jefferson

OF

Cherokee County

Widow of Francis Jefferson

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

1899.

AND HANDLED TO

W. A. Wright

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

Jefferson, Francis
Cherokee County
To Those Heretofore Paid

1900.

NO. 824

WIDOW'S PENSION,

For year ending February 15th, 1900.

PAID TO

Mrs. Francis Jefferson

OF

Cherokee County

Widow of Francis Jefferson

JNO. W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1900,

AND HANDLED TO

W. A. Wright

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Cherokee

Personally Comes Mrs.

Frances Jefferson

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 1844. That she is the Widow of

Thomas Jefferson who was a soldier in Company E of the 56th Regiment of Sea Volunteers, that he enlisted in said regiment on or about the month of March 1862 and served in the Army up to June 1865. That he lost his life on the day of June 1865 (State here full particulars of the husband's death, when, where and from what cause.)

was killed in the siege of Vicksburg Miss
in June 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 1844.

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 16th day of January, 1899.
A. L. Brown Ordinary.

Frances Jefferson
Post-Office mark

State of Georgia,

Cherokee County.I, A. L. Brown

Ordinary of said County, certify that I am well acquainted with Mrs. Frances Jefferson 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 16th day of January, 1899.

Official
Seal

A. L. Brown
Ordinary of Cherokee County.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Cherokee

Personally Comes Mrs.

Frances Jefferson

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 1844. That she is the Widow of

Thomas Jefferson who was a soldier in Company E of the 56th Regiment of Sea Volunteers, that he enlisted in said regiment on or about the month of March 1862 and served in the Army up to June 1865. That he lost his life on the day of June 1865 (State here particulars of the husband's death, when, where and from what cause.)

Said Husband was killed at Vicksburg Miss
in June 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 1844.

I have been allowed a pension as a resident of Cherokee County for the year ending February 15th, 1899, and now apply for the pension provided by law for the year ending February 15th, 1900.

Sworn to and subscribed before me, this 8th day of Jan, 1900.
A. L. Brown Ordinary.

Frances Jefferson
Post-Office mark

State of Georgia,

Cherokee County.I, A. L. Brown

Ordinary of said County, certify that I am well acquainted with Mrs. Frances Jefferson 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 8th day of Jan, 1900.

Official
Seal

A. L. Brown
Ordinary of Cherokee County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cherokee County.

I, Thomas Jefferson hereby authorize
H. B. Carson of Cherokee County
 to receive and receipt for the pension paid hereon and request that he remit same to
me at Cherokee

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 1st
 day of January 1901.

Executed in presence of Thomas Jefferson [L. S.]

H. B. Carson
 Notary Public for the State of Georgia

John W. Lindsey
Cherokee County

To Those Heretofore Paid.

1901.

No. 2472

WIDOW'S PENSION,

For year ending February 15th, 1901.

PAID TO

Mrs. Thomas Jefferson

OF Cherokee County.

Widow of Thomas Jefferson

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

2/12 1901,

AND HANDLED TO

John

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

STATE OF GEORGIA,

Personally Comes Mrs.

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cherokee

Personally Comes Mrs.

Frances Jefferson

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 1858. That she is the Widow of

Thomas Jefferson who was a soldier in Company E of the 86th Regiment of Vol.

Volunteers, that he enlisted in said regiment on or about the month of March 1862 and served in the Army up to June 1865. That he lost his life on the day of June 1865 (State here

particulars of the husband's death, when, where and from what cause) He was killed at Vicksburg
Mississippi in June 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 1844.

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 2^d day of May 1901. H. C. Connor Ordinary. Frances Jefferson Post Office made

State of Georgia,

Cherokee County.I H. C. Connor

Ordinary of said County, certify that I am well acquainted

with Mrs. Frances Jefferson, 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 1858.

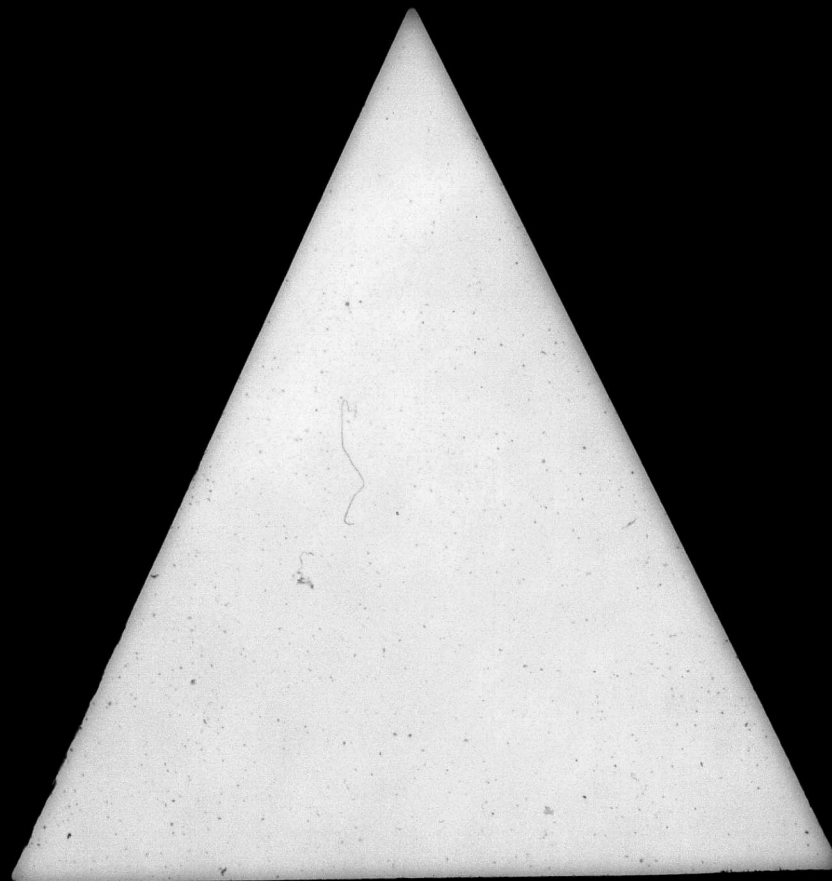
Given under my official signature and seal, this the 2^d day of May 1901.

Official Seal.

Ordinary of Cherokee County.

LOWERY DE VILLORNEY

BOARD OF VELLOVIA



POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA.

Cherokee County, }
Know all Men by these Presents, That I, *Margaret A. Jenkins*
of *Cherokee Co. Ga.* *Cherokee*

County, in said State, do hereby appoint
of *Paul Ross Jenkins* 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
23rd day of *April* 1891

Executed in the presence of us: *Margaret A. Jenkins* [L. S.]

J. J. Thomas
Wm. C. Harrison

DIRECTIONS.

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



Jenkins Margaret A.
Reported on by Her father
Cherokee Co. Georgia
1891.

1891
No. 1611

Widows' Pension

— PAID TO —

Mrs. Margaret A. Jenkins
— OF —
Cherokee COUNTY.

\$100.00.

Warrant issued

1891

AND HANDED TO

Geo. W. Harrison, State Printer Atlanta.

POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA,

Cherokee County.

Know all Men by these Presents, That I,

Margaret A. Jenkins
of *Belle Villa P.O. Cherokee*

County, in said State, do hereby appoint

H. M. Jones

of *Putnam 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
25th day of *April* 1891

Executed in the presence of:

J. J. Tharrald

W. P. Garrison Ordinary

DIRECTIONS.

If allowed, send amount by

me at _____, and oblige,



Geo. W. Harrison, State Printer, Atlanta.

AND HANDLED TO

1891

Warrant Issued

\$100.00.

Cherokee COUNTY.

Margaret A. Jenkins

PAID TO

Widow's Pension

156 20. 1611

1891.

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. *Margaret A. Jenkins*, who being sworn according to law, says under oath that she is the widow of *James L. Jenkins*, who was a soldier in the service of the Confederate States, and served as a member of Company *D*, of the

56 Regiment of *Ga* Volunteers; that he enlisted in said

service on or about the *2nd* day of *May* 1862, and was in the

Confederate Army up to 1862. That while in the

Army, he was on the _____ day of *July or August* 1862, (See Note No. 1)

he was at last account deponent had of him in the regular discharge of his duty as a Soldier in the Western Army in the State of *Tex.* that her said husband has never been heard of since the war. deponent knows nothing of his death until from what others told her, that *James* that her said husband has never been heard from since the time before stated, believes that he would have returned to his home if he had been permitted to live. deponent had never offered for him to do so.

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 *15th* day of *July* 1852, and that she has resided in Georgia continuously since the day of *January* 1848; 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

25 day of *April* 1891.

W. P. Garrison

Ordinary.

Margaret A. Jenkins

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 *Frederick*

In person came before me, the undersigned Ordinary

in and for said County, witnesses

and *James S. Pettyjohn, William Allen*

(each known to said Attesting Officer as truthful,

reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge,

Mrs. *Margaret A. Jones*, of the County of *Frederick*

State of Georgia, is the widow of *James L. Jones*, who was a soldier in

Company *G* of the *56th* Regiment of *Georgia* Volunteers.

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

about the *2^d* day of *May*, 1862. That while in said service, or by

reason of said service in the Army, he lost his life as follows: *He was captured*

by the enemy while sick in the State of Ky,

sent to a western prison & has never

been seen or heard from by deponents since

the war. He was captured in July or Aug,

1862, & never came home after the war,

We further swear that Mrs. *Margaret A. Jones* 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

15th day of *April*, 1891.

H. L. Hawkins

Ordinary.

James D. Pettyjohn
W. Allen
James C. Anglin

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. *Margaret A. Jones*

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

25th 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.

Certificate Ordinary of the County of Applicant's Residence.

STATE OF GEORGIA, County of CherokeeI, A. L. Brown Ordinary in and for said County ofCherokee State of Georgia, hereby certify that I am acquainted with Mrs.Margaret Jinks 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 James Jinks 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 15th day of July, 1897.

A. L. Brown Ordinary.

Form No. 2.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cherokee County.

I, Margaret Jinks hereby authorize Wm. A. Wright of Atlanta Ga to receive and receipt for the pension paid hereon and request that he remit same to A. L. Brown at Cherokee

In Witness Whereof, I have hereunto set my hand and seal, this 15th day of July, 1897.

Executed in the presence of

A. L. BrownMargaret Jinks [L. S.]

POWER OF ATTORNEY.

State of Georgia, Cherokee County.

I, Margaret Jinks hereby authorize Wm. A. Wright of Atlanta Ga to receive and receipt for the pension paid hereon and request that he remit same to A. L. Brown at Cherokee

In Witness Whereof, I have hereunto set my hand and seal, this 15th day of July, 1897.

Margaret Jinks [L. S.]

Executed in the presence of

A. L. Brown

I, Margaret Jinks hereby authorize Wm. A. Wright of Atlanta Ga to receive and receipt for the pension paid hereon and request that he remit same to A. L. Brown at Cherokee

In Witness Whereof, I have hereunto set my hand and seal, this 15th day of July, 1897.

Executed in the presence of

A. L. BrownMargaret Jinks [L. S.]Jinks, Margaret A.Cherokee Co.

For Those Heretofore Paid.

1898.

NO. 1974

WIDOW'S PENSION,

For year ending February 15th, 1898.

PAID TO

Mrs. Margaret Jinks

OF

Cherokee County,Widow of James Jinks

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

2//

AND HANDED TO

R W

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

AND HANDED TO

W. A. Wright

1897,

WARRANT ISSUED

2//

RICHARD JOHNSON,

Commissioner of Pensions.

Widow of James JinksCherokee County.Margaret Jinks

PAID TO

for year ending February 15th, 1897.

WIDOW'S PENSION,

No. 1974

1897.

FOR THOSE HERETOFORE PAID.

Jinks, Margaret A.
Cherokee County

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cherokee

Personally Comes Mrs.

Margaret D. Jenkins

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 24th Feb 1893 & 1894 1892 That she is the Widow ofJames Jenkins who was a Soldier in Company B. of the 56th Regiment of Cal.Volunteers, that he enlisted in said regiment on or about the month of May1862 and served in the Army up to May 1862 That he lost hislife on the day of July 1864 (State here

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

Died in Southern Prison in 1864 was taken Prison of war in May 1863 & 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, that she became his wife in the year 1862, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of Cherokee County for the year ending February 15th, 1896, and now apply for the pension provided by law for the year ending February 15th, 1897.

Sworn to and subscribed before me, this

19th day of May 1897.J. L. B. B. B. Ordinary.

Post-office

Margaret D. Jenkins

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Cherokee

Personally Comes Mrs.

Margaret D. Jenkins

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 1892 That she is the Widow ofJames Jenkins who was a Soldier in Company B. of the 56th Regiment of Cal.Volunteers, that he enlisted in said regiment on or about the month of May1862 and served in the Army up to May 1862 That he lost hislife on the day of July 1864 (State here

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

was taken Prisoner of war in May 1863 and died while 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 1862.

I have been allowed a pension as a resident of Cherokee 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

19th day of May 1898.J. L. B. B. B. Ordinary.Post-office DuffingtonMargaret D. Jenkins

State of Georgia,

Cherokee County.I J. L. B. B. B.

Ordinary of said County, certify that I am well acquainted with Mrs. Margaret D. Jenkins 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 July 1862.

Given under my official signature and seal this the 19th day of May 1898.

J. L. B. B. B.Ordinary of Cherokee County.

Official Seal.